

# Food Establishment Inspection Report

Score: 94

Establishment Name: PIZZA HUT #2845

Establishment ID: 3034011045

Date: 04 / 22 / 2013 Status Code: A

Time In: 10 : 15  am  pm Time Out: 01 : 00  am  pm

Total Time: 2 hrs 45 minutes

Category #: II

Establishment Type: \_\_\_\_\_

**Instructions:**

1. Fill in the information below for the Food Establishment:

Location Address: 3460 ROBINHOOD RD

City: WINSTON SALEM

State: NC Zip: 27106

County: 34 Forsyth

Permittee: N P C INTERNATIONAL, INC.

Telephone: \_\_\_\_\_

Inspection  
 Re-Inspection

**Wastewater System:**  
 Municipal/Community  
 On-Site System

**Water Supply:**  
 Municipal/Community  
 On-Site System

2. Click/fill the appropriate circle For "IN, OUT, N/A, N/O".  
 IN= In Compliance, OUT= Not in compliance  
 N/O=Not Observed, N/A= Not Applicable

3. Click/check the appropriate Boxes for CDI and/or R, VR.  
 CDI= Corrected During Inspection  
 R= Repeat Violation  
 VR= Verification Required

4. Continue to page 2 for "Good Retail Practices".

<b>Foodborne Illness Risk Factors and Public Health Interventions</b>											
Risk factors: Contributing factors that increase the chance of developing foodborne illness. Public Health Interventions: Control measures to prevent foodborne illness or injury.											
Compliance Status								OUT	CDI	R	VR
<b>Supervision</b> .2652											
1	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	PIC Present: Demonstration-Certification by accredited program and perform duties				<input type="radio"/> 2	<input type="radio"/> 0	<input type="radio"/>	<input type="radio"/>
<b>Employee Health</b> .2652											
2	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Management, employees knowledge; responsibilities & reporting				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/>	<input type="radio"/>
3	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Proper use of reporting, restriction & exclusion				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/>	<input type="radio"/>
<b>Good Hygienic Practices</b> .2652, .2653											
4	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Proper eating, tasting, drinking, or tobacco use				<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/>	<input type="radio"/>
5	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	No discharge from eyes, nose, and mouth				<input type="radio"/> 1	<input type="radio"/> 0.5	<input type="radio"/> 0	<input type="radio"/>	<input type="radio"/>
<b>Preventing Contamination by Hands</b> .2652, .2653, .2655, .2656											
6	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Hands clean & properly washed				<input type="radio"/> 4	<input type="radio"/> 2	<input type="radio"/> 0	<input type="radio"/>	<input type="radio"/>
7	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	<input type="radio"/> N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly allowed				<input type="radio"/> 3	<input checked="" type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/>
8	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Handwashing sinks supplied & accessible				<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/>	<input type="radio"/>
<b>Approved Source</b> .2653, .2655											
9	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Food obtained from approved source				<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/>	<input type="radio"/>
10	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/O	Food received at proper temperature				<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/>
11	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Food in good condition, safe & unadulterated				<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/>	<input type="radio"/>
12	<input type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input checked="" type="radio"/> N/O	Required records available: shellstock tags, parasite destruction				<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0
<b>Protection from Contamination</b> .2653, .2654											
13	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input type="radio"/> N/O	Food separated & protected				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0
14	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/>	Food-contact surfaces: cleaned & sanitized				<input type="radio"/> 3	<input type="radio"/> 1.5	<input checked="" type="radio"/>	<input type="radio"/>
15	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food				<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/>	<input type="radio"/>
<b>Potentially Hazardous Food Time/Temperature</b> .2653											
16	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input type="radio"/> N/O	Proper cooking time & temperatures				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0
17	<input type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input checked="" type="radio"/> N/O	Proper reheating procedures for hot holding				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0
18	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input type="radio"/> N/O	Proper cooling time & temperatures				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0
19	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input type="radio"/> N/O	Proper hot holding temperatures				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0
20	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input type="radio"/> N/O	Proper cold holding temperatures				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0
21	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input type="radio"/> N/O	Proper date marking & disposition				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0
22	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/>	<input type="radio"/> N/O	Time as a public health control: procedures & records				<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0
<b>Consumer Advisory</b> .2653											
23	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	Consumer advisory provided for raw or undercooked foods				<input type="radio"/> 1	<input type="radio"/> 0.5	<input type="radio"/> 0	<input type="radio"/>
<b>Highly Susceptible Populations</b> .2653											
24	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Pasteurized foods used; prohibited foods not offered				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/>
<b>Chemical</b> .2653, .2657											
25	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Food additives: approved & properly used				<input type="radio"/> 1	<input type="radio"/> 0.5	<input type="radio"/> 0	<input type="radio"/>
26	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Toxic substances properly identified stored, & used				<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/>
<b>Conformance with Approved Procedures</b> .2653, .2654, .2658											
27	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan				<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/>



# Food Establishment Inspection Report, continued

Establishment Name: PIZZA HUT #2845

Establishment ID: 3034011045

**Instructions, continued:**

5. Click the appropriate circle to fill-in for "IN, OUT, N/A, N/O".

IN= In Compliance, OUT= Not in compliance  
N/O=Not Observed, N/A= Not Applicable

6. Click or check the appropriate boxes for CDI and/or R, VR

CDI= Corrected during Inspection  
R= Repeat Violation  
VR= Verification Required

Calculate the "Total Deductions" and record.

7. Sign and complete "Signature Block".

8. Fill in "No. Of Risk Factor Intervention Violations" and "No. of Repeat Risk Factor Intervention Violations".

9. Continue to page 3 for "Comment Addendum to Food Establishment Inspection Report".

**Signature Block:**

Leah <sup>First</sup> Pilson <sup>Last</sup>

Person in Charge (Print)

*Leah Pilson*  
Person in Charge (Signature)

Clark <sup>First</sup> Sizemore <sup>Last</sup>

Regulatory Authority (Print)

*Clark Sizemore*  
Regulatory Authority (Signature)

Contact Number: ( 3 3 6 ) 7 0 3 - 3 1 2 8

Verification Required Date: \_\_\_ / \_\_\_ / \_\_\_

REHS ID: 944 - Sizemore, Clark

No. of Risk Factor/  
Intervention  
Violations: 2

No. of Repeat Risk  
Factor/Intervention  
Violations: \_\_\_\_\_

<b>Good Retail Practices</b>								
Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.								
Compliance Status		OUT	CDI	R	VR			
<b>Safe Food and Water .2653, .2655, .2658</b>								
28	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Pasteurized eggs used where required	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Water and ice from approved source	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A	Variance obtained for specialized processing methods	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Food Temperature Control .2653, .2654</b>								
31	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper cooling methods used; adequate equipment for temperature control	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32	<input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O	Plant food properly cooked for hot holding	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33	<input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O	Approved thawing methods used	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Thermometers provided & accurate	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Food Identification .2653</b>								
35	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Food properly labeled: original container	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657</b>								
36	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Insects & rodents not present; no unauthorized animals	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Contamination prevented during food preparation, storage & display	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Personal cleanliness	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Wiping cloths: properly used & stored	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Washing fruits & vegetables	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Proper Use of Utensils .2653, .2654</b>								
41	<input checked="" type="radio"/> IN <input type="radio"/> OUT	In-use utensils: properly stored	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
42	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
43	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Single-use & single-service articles: properly stored & used	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
44	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Gloves used properly	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Utensils and Equipment .2653, .2654, .2663</b>								
45	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
46	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Warewashing facilities: installed, maintained, & used; test strips	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
47	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Non-food contact surfaces clean	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Physical Facilities .2654, .2655, .2656</b>								
48	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Hot & cold water available; adequate pressure	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
49	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Plumbing installed; proper backflow devices	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
50	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Sewage & waste water properly disposed	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
51	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
52	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
53	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Physical facilities installed, maintained & clean	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
54	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Total Deductions:</b>			<b>6</b>					

# Comment Addendum to Food Establishment Inspection Report

Establishment Name: PIZZA HUT #2845

Establishment ID: 3034011045

Date: 04/22/2013

Location Address: 3460 ROBINHOOD RD

Status Code: A

City: WINSTON SALEM State: NC

Category #: II

County: 34 Forsyth Zip: 27106

Email 1:

**Wastewater System:**  Municipal/Community  On-Site System

**Water Supply:**  Municipal/Community  On-Site System

Email 2:

**Permittee:** N P C INTERNATIONAL, INC.

Email 3:

**Telephone:** \_\_\_\_\_

## Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
white sauce	cooler	40	tomatoes	salad bar	45			
ham	cooler	40	pepper	salad bar	44			
cheese	cooler	40	cheese	make unit	35			
sausage	cooler	40	ham	make unit	35			
sausage	bar	152	meat topping	make unit	35			
cheese pizza	cooked to	204	chicken	make unit	31			
eggs	salad bar	42	tomatoes	make unit	35			
cheese	salad bar	43						

## Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.

- 7 Observed employee touch pizza with bare hands while preparing pizza for buffet.  
3-301.11 Preventing Contamination from Hands
- 14 There was a film on the bottom of the sanitizer vat at the three compartment sink; film was remove with a steel pad and soap and water. The sink vats must be clean before they are placed into use.  
4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils
- 38 Two employees did not have a proper hair restrain.  
2-402.11 Effectiveness-Hair Restraints
- 45 Steel rolling cart in poor repair fix or replace. Need to caulk both hand sinks in kitchen. Make unit cover has damaged covered and 18" of steel trim hanging from cover into food storage area. The wall of the walkin freezer is damaged by ice fix this unit.  
4-201.11 Equipment and Utensils-Durability and Strength



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## Observations and Corrective Actions

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- 47 Need to clean the following : all wire shelving heavy dust found on wire shelving, green wire shelving in proofer, classic warmer, crumbs from cabinet warmer, gaskets in make unit, inside up right freezer, clean bottom shelf of work table , turn downs of work tables and drain boards, and vent at pizza make unit.  
4-602.13 Nonfood Contact Surfaces  
4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils
- 51 Need to clean urinal men's room and caulk sink in women's room.  
5-203.12 Toilets and Urinals
- 53 Need wall cleaning in all areas in kitchen splash found in food prep areas, cutting area and in dish washing area. wall repair is needed at one hand sink and at pizza oven area. Floor repair needed at cover in floor, and in other areas. Base board repair need in the walk in cooler. Need to clean floor under all equipment, found boxes of gloves, food particles, napkins, and paper towels under equipment. Need to clean ceilings at vents.  
6-501.12 Cleaning, Frequency and Restrictions  
6-201.16 Wall and Ceiling Coverings and Coatings
- 54 Need to clean hood filters and replace light bulb in men's restroom.  
6-501.14 Cleaning Ventilation Systems, Nuisance and Discharge Prohibition  
6-303.11 Intensity-Lighting



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: PIZZA HUT #2845

Establishment ID: 3034011045

## Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.

✓  
Spell



# Comment Addendum to Food Establishment Inspection Report

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Establishment ID: 3034011045

## Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.

✓  
Spell

