

# Food Establishment Inspection Report

Score: 97.5

Establishment Name: KFC 6

Establishment ID: 3034011283

Date: 10 / 17 / 2012 Status Code: A

Time In: 01 : 15  am  pm    Time Out: 03 : 45  am  pm

Total Time: 2 hrs 30 minutes

Category #: IV

Establishment Type: Fast Food Restaurant

**Instructions:**

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

Location Address: 826 S. MAIN STREET

City: KERNERSVILLE

State: NC Zip: 27284

County: 34 Forsyth

Permittee: LUIHN FOUR, 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 type="radio"/> IN	<input checked="" type="radio"/> OUT		Management, employees knowledge; responsibilities & reporting		<input type="radio"/> 3	<input type="radio"/> 1.5	<input checked="" type="radio"/> 0	<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"/>
<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"/>
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"/>
<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"/>
7	<input checked="" type="radio"/> IN	<input 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 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"/>
<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"/>
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"/>
12	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	<input 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 checked="" type="radio"/> IN	<input type="radio"/> OUT		Food-contact surfaces: cleaned & sanitized		<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<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"/>
<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 type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input checked="" 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"/> N/A	<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
<b>Highly Susceptible Populations</b> .2653									
24	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A		Pasteurized foods used; prohibited foods not offered		<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0
<b>Chemical</b> .2653, .2657									
25	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A		Food additives: approved & properly used		<input type="radio"/> 1	<input type="radio"/> 0.5	<input type="radio"/> 0
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
<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



# Food Establishment Inspection Report, continued

Establishment Name: KFC 6

Establishment ID: 3034011283

**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:**

Farhad Heidari  
Person in Charge (Print)

[Signature]  
Person in Charge (Signature)

Greg Gartner REHS  
Regulatory Authority (Print)

[Signature]  
Regulatory Authority (Signature)

Contact Number: ( 336 ) 703 - 3383

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

REHS ID: 2360 - Gartner, Gregory

No. of Risk Factor/  
Intervention  
Violations: 1

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</b> .2653, .2655, .2658								
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</b> .2653, .2654								
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 checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input 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</b> .2653								
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</b> .2652, .2653, .2654, .2656, .2657								
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 checked="" type="radio"/>	<input type="radio"/>
39	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Wiping cloths: properly used & stored	1	0.5	0	<input type="radio"/>	<input checked="" 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</b> .2653, .2654								
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</b> .2653, .2654, .2663								
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 checked="" type="radio"/>	<input type="radio"/>
46	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Warewashing facilities: installed, maintained, & used; test strips	1	0.5	0	<input type="radio"/>	<input checked="" 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 checked="" type="radio"/>	<input type="radio"/>
<b>Physical Facilities</b> .2654, .2655, .2656								
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 checked="" type="radio"/> IN <input type="radio"/> OUT	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
52	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	0	<input type="radio"/>	<input checked="" 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 checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
54	<input checked="" type="radio"/> IN <input 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>2.5</b>					

# Comment Addendum to Food Establishment Inspection Report

Establishment Name: KFC 6

Establishment ID: 3034011283

Date: 10/17/2012

Location Address: 826 S. MAIN STREET

City: KERNERSVILLE State: NC

County: 34 Forsyth Zip: 27284

Wastewater System:  Municipal/Community  On-Site System

Water Supply:  Municipal/Community  On-Site System

Permittee: LUIHN FOUR, INC.

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

Status Code: A

Category #: IV

Email 1: \_\_\_\_\_

Email 2: \_\_\_\_\_

Email 3: \_\_\_\_\_

## Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
tempered	kitchen handsinks	104	chicken wing	final cook	190	gravy	hot cabinet 2	166
wash vat	3 vat sink	88	m potatoes	hot hold table	178	macaroni	hot cabinet 2	138
sani vat	3 vat sink	76	bulk m.	hot hold table	155	m potatoes	hot cabinet 2	177
xtra crispy	hot drawer	152	sh cheese	cold table	38	chicken pie	hot cabinet 3	170
xtra crispy	hot drawer	142	cole slaw	cold table	38	filet	hot cabinet 3	155
potato wedge	hot drawer	142	chicken	hot cabinet 1	165	slaw	reach in cooler	35
orig leg	hot drawer	142	corn cob	hot cabinet 1	157			
orig wing	hot drawer	152	greenbeans	hot cabinet 2	149			

## 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

- 2 No health policy available upon request. Review management and employee health policy requirements in 2009 Food Code section 2-103.11 M and 2-201.11 A, B, C and D. Prepare to meet the policy requirements by next inspection. Refer to handout.
  
- 38 Food employee observed with unrestrained beard. 15A NCAC 18A .2652 ref. 2-402.11 (A): Food employees shall wear hair restraints such as hats, hair coverings or nets, beard restraints, and clothing that covers body hair, that are designed and worn to effectively keep their hair from contacting exposed food; clean equipment, utensils, and linens; and unwrapped single-service and single-use articles  
FYI - 15A NCAC 18A .2652 ref. 2-303.11: Except for a plain ring such as a wedding band, while preparing food, food employees may no wear jewelry including medical information jewelry on their arms or wrists
  
- 39 Sanitizer buckets stored on floor must be removed. 15A NCAC 18A .2653 ref. 3-304.14 (E) Containers of chemical sanitizing solutions in which wet wiping cloths are held between uses shall be stored off the floor and used in a manner that prevents contamination of food, utensils, linens, and equipment.
  
- 45 Replace torn gasket at small reach in cooler (Repeat) / Replace broken diffusers in soda machine. / Properly sleeve or cap screw threads on underside of front handsink.



# Comment Addendum to Food Establishment Inspection Report

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## Observations and Corrective Actions

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- 46 Wash solution in 3 vat sink measured at 88°F, below the minimum requirement. 15A NCAC 18A .2654 ref. 4-501.19: The temperature of the wash solution in manual warewashing equipment shall be maintained at not less than 110°F or the temperature specified on the cleaning agent manufacturer's label instructions.
- 47 Clean under retail beverage cooler, shelving under air drying drainboard, tops of cookline ovens, and piping under sinks and behind fryers.
- 52 Dumpster side door is stuck ajar and must be repaired so that it completely closes securely. / Provide a lidded trash can in the women's toilet room.
- 53 All repeat violations --> RegROUT floor tile by drive window the make smooth and easily cleanable. / Reseal FRP wallboard at can wash. / All escutcheon discs at pipe penetrations are loose, bent, or missing (under prep sinks, front hand sink, customer toilets, etc.) Repair. / Remove expandable foam insulation at electrical panel under drive beverage station and properly seal. / Clean under beverage stations. / Water access ports in walls under or by kitchen handsinks must be brought flush with wall, and completely sealed around perimeter. / Properly seal rear handsink to wall.

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## Observations and Corrective Actions

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✓  
Spell



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✓  
Spell

