۲	00	)d	E	St	ablishment Inspection	R	e	po	rt								Scor	e:	ć	97		
Es	tal	olis	hn	ner	nt Name: SUBWAY 51859									E	St	tablishment ID: 3034012117						
					ess: 6782 RIVER CENTER DRIVE							_										
City: CLEMMONS						Sta	ite	. N	С							<u>0 1 / 1 0 / 2 0 1 4</u> Status Code: <u>-</u>						
Zip: 27012 County: 34 Forsyth											_ 1	in	ne	ı İr	n: <u>∅ 3</u> : <u>∅ ∅ ⊗ pm</u> Time Out: <u>∅ 4</u>	: 35	$\stackrel{\circ}{\otimes}$	) a	m m			
Permittee: PARRISH INC.													ime: 1 hr 35 minutes			•						
				_								_ (	a	te	gc	ory #: <u>II</u>				_		
			one					0:1-	_	- 1		— <sub>F</sub>	D	Α	Е	stablishment Type: Fast Food Restaura	nt					
					System: Municipal/Community [					'Ste	em	١	10	. c	of	Risk Factor/Intervention Violation	s: 2					
N	ate	r S	Sup	ply	<b>/:</b> ⊠Municipal/Community □ On-	Site	S	upp	oly			١	10	. C	of	Repeat Risk Factor/Intervention \	′iolati	or	ıs:			
-	-00	dbo	orne	e III	ness Risk Factors and Public Health Int	erve	enti	ions								Good Retail Practices						
F	Risk	facto	ors: (	Contri	buting factors that increase the chance of developing foodb	orne i	illne	-			Go	ood R	eta	ail P	rac	ctices: Preventative measures to control the addition of	pathoge	ens,	che	mica	ıls,	
-			_		ventions: Control measures to prevent foodborne illness or			Tapil			Т.,		-1.			and physical objects into foods.				امما	_	
5		rvis	N/A ion	N/O	Compliance Status  .2652	OU	)	CDI	R V	$\exists$		e Fo	_	_		Compliance Status  Vater .2653, .2655, .2658		OUT	1	CDI	R	VK
		X			PIC Present; Demonstration-Certification by accredited program and perform duties	X	0			] [2	28	$\overline{}$		$\overline{}$		Pasteurized eggs used where required	1	0.5	0			
E	mpl	oye	e He	alth	.2652						29 2	<b>3</b> C	1			Water and ice from approved source	2	1	0			
2	X				Management, employees knowledge; responsibilities & reporting	3 1.5	5 0			٦lԻ	30 [	_	] [2	$\overline{\mathbf{x}}$		Variance obtained for specialized processing		0.5	0	П	$\Box$	
3	X				Proper use of reporting, restriction & exclusion	3 1.5	5 0			]					atu	methods re Control .2653, .2654						
(			gien	ic Pr	actices .2652, .2653		_		Ţ		31 2	<b>3</b> [	Ţ	П		Proper cooling methods used; adequate equipment for temperature control	1	0.5	0			
4	X				Proper eating, tasting, drinking, or tobacco use	2 1	1			] ;	32 [	510		X		Plant food properly cooked for hot holding	1	0.5	0			
5	X				No discharge from eyes, nose or mouth	1 0.5	5 0			٦I⊢	33 2	_	+	$\rightarrow$		Approved thawing methods used		0.5	+	Н	П	П
		entin	ig Co	onta	mination by Hands .2652, .2653, .2655, .2656				-Jr	IIН	34 2	_	+			Thermometers provided & accurate		0.5			$\Box$	П
6	X				Hands clean & properly washed  No bare hand contact with RTE foods or pre-	4 2	2 0			╣		od Ide		ific	ati	·			ت			
7	×			Ш	approved alternate procedure properly followed	3 1.5	+			<u> </u>  [:	35 2	<b>3</b> [	ī	П		Food properly labeled: original container	2	1	0			
	X		1.0		Handwashing sinks supplied & accessible	2 1	0		_ [	4	Pre	venti	on	of	Fo	od Contamination .2652, .2653, .2654, .2656,						
<i>F</i> 9	ippr X	oved	d So	urce	Food obtained from approved source	21	0				36 2	<b>3</b>   [	]			Insects & rodents not present; no unauthorized animals	1 2	][	0			
	_				Food received at proper temperature		╁	$\vdash$		<u> </u>   :	37 🛭	<b>3</b>   [				Contamination prevented during food preparation, storage & display	2	][	0			
10		_				2 1	+	+		<u> </u>	38 2	<b>3</b> [	]			Personal cleanliness	1	0.5	0			
11	X				Food in good condition, safe & unadulterated  Required records available: shellstock tags,		0	+	_  _	<u> </u>   ;	39 🛭	<b>3</b> C	]			Wiping cloths: properly used & stored	1	0.5	0			
12	roto	L	X fr	L (	parasite destruction contamination .2653 .2654	2 1	0	الـــال	ᆜ┖	4	10 ∑	<b>3</b> C	1 [			Washing fruits & vegetables	1	0.5	0			
					Food separated & protected	3 1.5	5 0		٦IF	╗	Pro	per l	Jse	e of	Ut	tensils .2653, .2654						
14		×			Food-contact surfaces: cleaned & sanitized	$\blacksquare$	×				<b>11</b> ∑	<b>3</b>   [				In-use utensils: properly stored	1	0.5	0			
	×				Proper disposition of returned, previously served,		0			-	12 2	<b>3</b>   [	]			Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0			
		ntial	lv Ha	azaro	reconditioned, & unsafe food dous Food TIme/Temperature .2653					-	13 [	] <u> </u>	3			Single-use & single-service articles: properly stored & used	1	×	0			
16			×		Proper cooking time & temperatures	3 1.	5 0			] [	14 2	<b>3</b> C	寸			Gloves used properly	1	0.5	0			
17				X	Proper reheating procedures for hot holding	3 1.	5 0			3	Ute	nsils	an	nd E	Εqι	uipment .2653, .2654, .2663						
18				×	Proper cooling time & temperatures	3 1.	5 0			]	15 <b>2</b>	<b>a</b>  c				Equipment, food & non-food contact surfaces approved, cleanable, properly designed,	2	1	0			
19	×				Proper hot holding temperatures	3 1.	5 0		<u> </u>		16 D	<b>a</b> [	$^{+}$			constructed, & used Warewashing facilities: installed, maintained, &	ķ <sub>1</sub>	0.5		П		
20	$\boxtimes$			П	Proper cold holding temperatures	3 1.	5 0		7	⊐l ⊢	17 D	_	+			used; test strips  Non-food contact surfaces clean	1		50			
21	X				Proper date marking & disposition	3 1	5 0		7			/sica		acil	litie			10.3		Ш	Ш	
22			×		Time as a public health control: procedures &	211	0			-	18 2		т.			Hot & cold water available; adequate pressure	2	1	0			
	ons	ume	er Ac	dviso	records ory .2653			יועוי		4	19 🛭	<b>a</b> c	1			Plumbing installed; proper backflow devices	2	1	0			
23			X		Consumer advisory provided for raw or undercooked foods	1 0.	5 0			∃⊢	50 <b>2</b>		1			Sewage & waste water properly disposed	2	1	0	П		
ŀ	ligh	y Sı	ısce	ptib	e Populations .2653					<b>⊺</b> ⊢	51 2	+	+			Toilet facilities: properly constructed, supplied	1		$\equiv$	-		F
24			×		Pasteurized foods used; prohibited foods not offered	3 1.5	5 0			J ├	+	_	+	4		& cleaned Garbage & refuse properly disposed; facilities		×	F			
		nica			.2653, .2657					4	1	_	+			maintained		+	+-	H	X	
25	X	ᆜ			Food additives: approved & properly used	110.5	5 0		_  _	<u> </u>  ¦	3 2	+	1	4		Physical facilities installed, maintained & clear		0.5	$\equiv$			
26	$\boldsymbol{\times}$	$\sqcup$	$ \Box $		Toxic substances properly identified stored, & used	2 1		] [ [ ] [	[	] [5	54  <b>ك</b>	▋┃□	Ш			Meets ventilation & lighting requirements;	1	0.5	0	الــاا	الــاا	$\square$



Conformance with Approved Procedures .2653, .2654, .2658

Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan



Total Deductions: 3

Comment Addendum to Food Establishment Inspection Repor
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Establishment I	Name: SUBWAY 51859			Establis	hment ID	):_3034012117		
Location Addr	ess: 6782 RIVER CENTI	ER DRIVE		⊠Inspe	ction	Re-Inspection	Date: 01/10/2	2014
City: CLEMMO		S	State: NC	•		Attached?	Status Code	. A
County: 34 Fo		Zip:_27012					Category #:	
,	em: Municipal/Community			Email 1:				
Water Supply:  Permittee: Page 197	Municipal/Community	y On-Site System		Email 2:				
Telephone:	74440111140.			Email 3:				
reiepriorie		Temr	nerature (	Observation	ne			
		Гетр Item	Location	 	Temp	Item	Location	Temp
<del></del>	•	30 lettuce	walk in c	ooler	42			
	ake top 4	<del></del>						
	ake top 3							
	ake top 4							
	ake top 4	<del></del>						
chicken re	ach in cooler 4							
	ach in cooler 3							
chicken wa	alk in cooler 2	2 				_		
manager cert	tified Food Protection Nification. The manager	that has food pro	otection man	ager certifica	ation is no	t present today.	As of January	
manager cert person in cha inspection.  4 4-501.114 Ma Hardness - P the sanitizer the Ammonia sar measuring sa in the sanitized  4 4-903.12 Prol handwash sir	ification. The manager	Warewashing Equator on the preparation of the prepa	otection man SI accredited suipment, Che ink did not me from the disponent's instruct concentration initizer bottled	emical Sanitineasure a visenser at the tions) at all tine and then fill was refilled versioned under the stored under the tions.	zation is no ction mana zation-Ter ible color three com mes. Rec il the sanit with this sa	t present today.  ager certification  mperature, pH, C change on the te partment sink. N ommend filling th izer bottles. CDI anitizer solution.  eath the plumbing hes that are not s	As of January and be present concentration at est strips. PIC : Maintain Quate the sanitizer was I- Sanitizer was g for the make shielded to inter	nd stated that mary and dispensed
manager cert person in cha inspection.  4     4-501.114 Mathardness - Pethe sanitizer to Ammonia sar measuring sain the sanitizer sain the sain the sanitizer sain the sa	anual and Mechanical \ - GC: A bottle of saniti bottles are filled every r nitizer between 150-400 anitizer to ensure it is after vat and it measured  hibitions - C - Individua nk. Single use and sing s. CDI- PIC placed spo	Warewashing Equation must have AN Warewashing Equation the preposition of the preposition of the appropriate of the appropriate of 150ppm QA. Sarully wrapped spool le service articles bons and knives in First	sipment, Che ink did not m om the disponents instruct concentration itizer bottle  and knive may not be an approve Alvirde	emical Sanitineasure a visenser at the tions) at all tine and then fill was refilled versioned under the stored under the tions.	zation is no ction mana zation is no ction mana zation-Ter ible color three commes. Recall the sanit with this said underner sewer lirea (cabin	t present today.  ager certification  mperature, pH, C change on the te partment sink. N ommend filling th izer bottles. CDI anitizer solution.  eath the plumbing hes that are not s	Concentration arest strips. PIC sMaintain Quater he sanitizer was I- Sanitizer was g for the make shielded to interave).	nd stated that mary and dispensed



Establishment Name: SUBWAY 51859 Establishment ID: 3034012117

#### **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

5-501.111 Area, Enclosures and Receptacles, Good Repair - C - Repeat: There are holes on the right side of the dumpster and inside left side brace



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Establishment ID: 3034012117 Establishment Name: SUBWAY 51859

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.





Establishment Name: SUBWAY 51859 Establishment ID: 3034012117

#### **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.





Establishment Name: SUBWAY 51859 Establishment ID: 3034012117

#### **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.



