ΓΟ	Ju		Эl	abiisiiiieiit iiispectioi	1 1	<i>'</i> C	<u> </u>	UI	ι					30	,UI	e.	9	0.3	<u> </u>
Estal	olis	shm	ner	nt Name: MCDONALD S #31674									Esta	ablishment ID: 3034014081					
Location Address: 3470 PKWY VILLAGE CIR							☐ ☐ Re-Inspection												
Citv:	WI	INST	ΓΟΝ	SALEM	St	ate	۶.	NC			D	ate	e: 0	7 / 17 / 2013 Status Code: A					
Zip: 27107 County: 34 Forsyth  Permittee: RAT RACE MANAGEMENT, INC  Telephone: Mastewater System: Municipal/Community On-Site System:								Time In: $10 : 20 \overset{\otimes \text{ am}}{\circ} \text{ pm}$ Time Out: $12 : 00 \overset{\odot}{\otimes} \text{ pm}$											
							Total Time: 1 hr 40 minutes												
	Permittee: RAT RACE MANAGEMENT, INC								Category #: II										
_													_	stablishment Type:					
Wast	tew	vate	er S	System: Municipal/Community		) On	-Si	te S	Sys	tem				Risk Factor/Intervention Violations:	1				
Wate	er S	Sup	ply	<b>/:</b> ⊠Municipal/Community □ On-	-Sit	e S	Sup	ply	/					Repeat Risk Factor/Intervention Viol		on	_ S:_		
Foo	dbo	orne	ااا ڊ	ness Risk Factors and Public Health In	terv	en	tior	ns						Good Retail Practices					
Risk	facto	ors: C	ontri	buting factors that increase the chance of developing food	lborne	illn				Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals,									
	_		_	ventions: Control measures to prevent foodborne illness of	<u> </u>						and physical objects into foods.								
Supe		N/A	N/O	Compliance Status .2652	C	DUT	CE	)I R	VR	Safo	_	_	N/O	Compliance Status ater .2653, .2655, .2658		OUT	C	CDI	R VR
1 X				PIC Present; Demonstration-Certification by	2	Г	חוכ	10	П	28 🗆	Т		$\overline{}$	Pasteurized eggs used where required	1	0.5		٦Ir	
Empl			alth	accredited program and perform duties .2652				1		29 🔀	₽		3	Water and ice from approved source	2	1 1	0		
2 🗵				Management, employees knowledge; responsibilities & reporting	3	1.5 (					Н		,	Variance obtained for specialized processing	-	$\vdash$	=	_  -	
3	П			Proper use of reporting, restriction & exclusion	3	1.5 (	חוד	10	П	30		X		methods	1	0.5	0	_  -	
	d Hy	gieni	ic Pr	ractices .2652, .2653		71-				31	$\overline{}$	npe	ratur	e Control .2653, .2654  Proper cooling methods used; adequate	1	16.5		— T	
4 🗵		Ĭ		Proper eating, tasting, drinking, or tobacco use	2	1 (				$\vdash$	-		_	equipment for temperature control	+	F	0 [	_  -	
5 🗵	П			No discharge from eyes, nose or mouth	1	0.5	0	1	П	32 🔀	-			Plant food properly cooked for hot holding	1	0.5	0 [	4	44
	entir	ng Co	onta	mination by Hands .2652, .2653, .2655, .2656						33				Approved thawing methods used	1	0.5	0		10
6 🗵				Hands clean & properly washed	4	2	0 [			34				Thermometers provided & accurate	1	0.5	0 [		
7 🗵				No bare hand contact with RTE foods or pre-	3	1.5	0 [		П		_	ntifi	icatio	n .2653	Ţ		Ţ	Ţ	
8 🗆	×			approved alternate procedure properly followed Handwashing sinks supplied & accessible	2	<b>Y</b>				35			Ш	Food properly labeled: original container	2	1	0		
Appr		d Soi	ırce	• 11	الكال				Ľ		$\overline{}$	n c	of Foo	nd Contamination .2652, .2653, .2654, .2656, .265 Insects & rodents not present; no unauthorized	$\overline{}$				
9 X			uicc	Food obtained from approved source	2	1 (		ΙП	П	36	-			animals	2	1	0 [	4	쁘
10 🗆			<b>X</b>	Food received at proper temperature	2	1 0			H	37				Contamination prevented during food preparation, storage & display	2	1	0		
11 🗵					2	7				38 🗆	X			Personal cleanliness	1	×	0	X	
		54		Food in good condition, safe & unadulterated  Required records available: shellstock tags,		=	#=			39 🔀				Wiping cloths: properly used & stored	1	0.5	0		
12	L	×		parasite destruction	2	ПГ		儿니	닏	40 🗵		Е	]	Washing fruits & vegetables	1	0.5	0 [		
13		on ire	m C	Contamination .2653, .2654 Food separated & protected		15 (			П			se o	of Ute	ensils .2653, .2654					
	-						ℲΕ			41				In-use utensils: properly stored	1	0.5	0		
14 🛛				Food-contact surfaces: cleaned & sanitized  Proper disposition of returned, previously served	3	=	기		Ш	42 🔀				Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0 [	7	55
15 🔀	Ш			reconditioned, & unsafe food	, 2	1 (			Ш	43 🔀	-			Single-use & single-service articles: properly	1	0.5	0 [	7	1
$\overline{}$	ntial	ly Ha	izaro	dous Food Time/Temperature .2653				J			+-			stored & used	+			_  -	
16	Ш	Ш		Proper cooking time & temperatures	3	1.5	)   _	4	Ш	44			L	Gloves used properly	1	0.5	0	_  -	
17 📙	Ш	×	Ш	Proper reheating procedures for hot holding	3	1.5 (		Щ	Ш		I	and	Equ	ipment .2653, .2654, .2663 Equipment, food & non-food contact surfaces	T				
18 🗆			X	Proper cooling time & temperatures	3	1.5 (				45				approved, cleanable, properly designed, constructed, & used	2	1	0	_  [	
19 🗵				Proper hot holding temperatures	3	1.5				46				Warewashing facilities: installed, maintained, & used; test strips	1	0.5	0		
20 🔀				Proper cold holding temperatures	3	1.5				47 🔀				Non-food contact surfaces clean	1	0.5	0 [		50
21 🔀				Proper date marking & disposition	3	1.5 (				Phys	ical	Fac	cilities	.2654, .2655, .2656					
22 🔀	П	П		Time as a public health control: procedures &	2	1 (		$d = \frac{1}{2}$	П	48			]	Hot & cold water available; adequate pressure	2	1	0		
Cons	ume	er Ad	lviso	records orv .2653				1		49 🗆	×			Plumbing installed; proper backflow devices	2	1	X [		50
23 🗆		×		Consumer advisory provided for raw or undercooked foods	1	0.5				50 🔀	+			Sewage & waste water properly disposed	2	1	0 [	7	丗
	ly Sı	$\perp$	ptibl	le Populations .2653						$\vdash$	+	H	+	Toilet facilities: properly constructed, supplied	1		0	7 ,	
24 🗆		×		Pasteurized foods used; prohibited foods not offered	3	1.5				51 📮	_		1	& cleaned Garbage & refuse properly disposed; facilities	+	H		_  -	
Chen	nica	İ		.2653, .2657						52 🗵	-			maintained	1	0.5	0		48
25 🔀				Food additives: approved & properly used	1	0.5				53				Physical facilities installed, maintained & clean	1	0.5	0		
26 🔀	lп			Toxic substances properly identified stored, & used	2	1				54 🔀				Meets ventilation & lighting requirements; designated areas used	1	0.5	0		
	Ľ	'									1								



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



Total Deductions: 1.5

	Comment	Addend	dum to I	Food E	<u>stablishme</u>	ent Inspect	tion Report						
Establishmeı	nt Name: MCDON	ALD S #31674			Establishment ID: 3034014081								
	ddress: 3470 PKW					☐ Re-Inspection							
City: WINST			St			Status Code: A							
County: 34	Forsyth		_ Zip: <u>_<sup>27107</sup>_</u>				Category #: <u>II</u>						
Wastewater S Water Supply	System: ⊠ Municipal/0 : ⊠ Municipal/0	Community   Commun			Email 1:								
	RAT RACE MANAC	GEMENT, INC			Email 2:								
Telephone:					Email 3:								
			Temp	erature C	bservations								
ltem chicken	Location final cook	Temp 194	Item liquid egg	Location ice bath	Te 42	emp Item	Location	Temp					
sausage	hot hold	156	liquid egg	ice bath	41								
hamburger	hot hold	179											
grilled chicken	final cook	190											
egg	reach in cooler	42											
ham	reach in cooler	40											
ham	walk in cooler	40											
egg	walk in cooler	38											
Vi	olations cited in this r				orrective Actiones below, or as star		5.11 of the food code.						

Both the front and rear hand sinks were blocked at the time of this inspection. Hand sinks must be kept free from obstructions at all times for hand washing.



- A manager was observed preparing food with out a proper hair restraint. All employees involved in food prep must wear effective 38 hair restraints.
- A back flow preventer rated for continuous pressure is needed between the faucet and the valve / splitter in the can wash area. Repair the damaged valve / splitter on the can wash faucet.

Person in Charge (Print & Sign):

VILMA 5. KI miray

Regulatory Authority (Print & Sign):

REHS ID: 1938 - Faircloth, Craig

uired Date: Ø 7 / 26 / 2013

REHS Contact Phone Number: ( 3 3 6 ) 7 0 1 - 3 1 6 6





# **Comment Addendum to Food Establishment Inspection Report**

Establishment Name: MCDONALD S #31674 Establishment ID: 3034014081

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.





## Comment Addendum to Food Establishment Inspection Report

Establishment Name: MCDONALD S #31674 Establishment ID: 3034014081

#### **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.





# Comment Addendum to Food Establishment Inspection Report

Establishment Name: MCDONALD S #31674 Establishment ID: 3034014081

### 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.



