## Food Establishment Inspection Report

Establishment Name: PULLIAM S Establishment ID: 3034020126

Date: <u>12</u> / <u>21</u> / <u>2012</u>	Status Code: A
Time In: <u>Ø 9</u> : <u>5 Ø ⊗</u> am	Time Out: <u>1 2</u> : <u>3 5 ⊗ am</u>
Total Time: 2 hrs 45 minute	es
Category #: II	
Establishment Type:	_

### Instructions:

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

Location Address: 440	0 OLD WALKERTOWN ROAD
City: WINSTON-SALEM	1
State: NC	Zip: <u>27105</u>
County: 34 Forsyth	
Permittee: JS PULLIA	MS INC.
Telephone:	
⊗Inspection	
○Re-Inspection	
Wastewater System:	
⊗Municipal/Commun	iity
○On-Site System	
Water Supply:	
⊗Municipal/Commun	ity
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".

Foodborne Illness Risk Factors and Public Health Interventions

Score: 91.5

Risk factors: Contributing factors that increase the chance of developing foodborne illness.

Public Health Interventions: Control measures to prevent foodborne illness or injury.							
Со	mplianc	e Statu	s	OUT	CDI	R	VR
Su	pervision		.2652				
1	⊗ C IN OU		PIC Present; Demonstration-Certification by accredited program and perform duties	$\bigcirc \bigcirc$ $\bigcirc$ $\bigcirc$ $\bigcirc$	0	0	0
En	ployee		.2652				
2		⊗ OUT	Management, employees knowledge; responsibilities & reporting	○ ○ <b>⊗</b> 3 1.5 0	8	0	0
3	⊗ IN	OUT	Proper use of reporting, restriction & exclusion	○ ○ ○ 3 1.5 0	0	0	0
Go	od Hyg	ienic F	Practices .2652, .2653				
4		⊗ OUT	Proper eating, tasting, drinking, or tobacco use	<b>⊗</b> ○ ○ 2 1 0	0	8	0
5	⊗ IN	OUT	No discharge from eyes, nose, and mouth	0 0 0 1 0.5 0	0	0	0
Pre		g Cont	amination by Hands .2652, .2653, .2655, .2656	5			
6	⊗ IN	OUT	Hands clean & properly washed		0	0	0
7	O &		No bare hand contact with RTE foods or pre-approved alternate procedure properly allowed	○ ○ <b>⊗</b> 3 1.5 0	8	0	0
8	⊗ IN	OUT	Handwashing sinks supplied & accessible	O O O 2 1 0	0	0	0
Αp	proved	Sourc	e .2653, .2655				
9	⊗ IN	OUT	Food obtained from approved source	$  \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0
10	O C	) <b>⊗</b> T N/O	Food received at proper temperature	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0
11		OUT	Food in good condition, safe & unadulterated	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0
12		<b>⊗</b> ○ I/A N/O	Required records available: shellstock tags, parasite destruction	$  \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0
Pro	otection	from	Contamination .2653, .2654				
13	⊗ ○ I TUO NI	○	Food separated & protected	0 0 0 3 1.5 0	0	0	0
14	O IN	⊗ OUT	Food-contact surfaces: cleaned & sanitized	○ <b>⊗</b> ○ 3 1.5 0	0	0	0
15	⊗ IN	OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food	0 0 0 2 1 0	0	0	0
Po	Potentially Hazardous Food Time/Temperature .2653						
16	⊗ ○ ¢ IN OUT N	O O I/A N/O	Proper cooking time & temperatures	○ ○ ○ 3 1.5 0	0	0	0
17	⊗ ○ ¢ IN OUT N	O O I/A N/O	Proper reheating procedures for hot holding	○ ○ ○ 3 1.5 0	0	0	0
18	⊗ ○ ¢ IN OUT N	O O I/A N/O	Proper cooling time & temperatures	○ ○ ○ 3 1.5 0	0	0	0
19	⊗ ○ 《 NTUONI	O O I/A N/O	Proper hot holding temperatures	○ ○ ○ 3 1.5 0	0	0	0
20	⊗ ○ 《 NTUONI	O O I/A N/O	Proper cold holding temperatures	○ ○ ○ 3 1.5 0	0	0	0
21	○ ⊗ ⟨ N TUO NI	O O I/A N/O	Proper date marking & disposition	○ ○ <b>⊗</b> 3 1.5 0	8	0	0
22	O O (	<b>⊗</b> ○ I/A N/O	Time as a public health control: procedures & records	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0
Со	nsumer	Advis	sory .2653				
23	O C IN OU		Consumer advisory provided for raw or undercooked foods	0 0 0 1 0.5 0	0	0	0
Ηiς	ghly Sus	sceptil	ple Populations .2653				
24	O C IN OU		Pasteurized foods used; prohibited foods not offered	0 0 0 3 1.5 0	0	0	0
Ch	emical		.2653, .2657				
25	⊗ C IN OU		Food additives: approved & properly used	0 0 0 1 0.5 0	0	0	0
26	O &		Toxic substances properly identified stored, & used	○ <b>⊗</b> ○ 2 1 0	0	8	0
Со			th Approved Procedures .2653, .2654,	.2658			
27	O &	T N/A	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	$\bigcirc\bigcirc\otimes$	8	0	0

North Carolina Department of Health & Human Services ● Division of Public Health Environmental Health Section • Food Protection Program

## Food Establishment Inspection Report, continued

Establishment Name: PULLIAM S Establishment ID: 3034020126

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ınstrı	<b>JCTIONS</b>	continu	rea:

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

- 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:

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

REHS ID: 1846 - Williams, Tony

No. of Repeat Risk Factor/Intervention Violations: 2

Safe Food and Water  2653, 2655, 2658  28   N OUT   Pasteurized eggs used where required   1 0.5 0   0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Good Retail Practices						
Safe Food and Water  2653, 2655, 2658  28   N OUT   Pasteurized eggs used where required   1 0.5 0   0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
28 N OUT Pasteurized eggs used where required	C	ompliar	ice Statu	ıs	OUT	CDI	R	VR
28 IN OUT Passeurized eggs used where required 1 0.5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Sa	_		Vater .2653, .2655, .2658				
Majort   M	28			Pasteurized eggs used where required		0	0	0
Food Temperature Control    30	29	IÑ	OUT	Water and ice from approved source	2 1 0	0	0	0
31   IN OUT   Proper cooling methods used; adequate equipment for   1 0.5 0   0   0   0   0   0   0   0   0   0	30			Variance obtained for specialized processing methods		0	0	0
IN OUT   temperature control   1 0.5 0   0   0   0   0   0   0   0   0   0	Fo	od Te	mperatu	ure Control .2653, .2654				
32   IN OUT NIA NIC   Approved thawing methods used	31	⊗ IN	OUT		1 0.5 0	0	0	0
33 IN OUT NA NC  Approved thawing methods used	32		TN/A N/O	Plant food properly cooked for hot holding	1 0.5 0	0	0	0
Food Identification  2653  35	33	IN OU	N/A N/O	Approved thawing methods used	1 0.5 0	0	0	0
35	34			Thermometers provided & accurate		0	0	0
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657  36    N	Fo			ion .2653				
36	35			Food properly labeled: original container		0	0	0
10   10   10   10   10   10   10   10	Pr	_	on of Fo	ood Contamination .2652, .2653, .2654, .2656	6, .2657			
37 N OUT storage & display  38 N OUT Personal cleanliness  1 0.5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	36			Insects & rodents not present; no unauthorized animals		0	0	0
38 IN OUT Personal clear interess	37					0	0	0
Nout   Washing fruits & vegetables   1 0.5 0   0   0   0   0   0   0   0   0   0	38			Personal cleanliness		0	0	0
Proper Use of Utensils    1	39	ΙŇ		Wiping cloths: properly used & stored		0	0	0
41 IN OUT In-use utensils: properly stored	40			Washing fruits & vegetables		0	0	0
1	Pr			tensils .2653, .2654				
1	41	IN	OUT	In-use utensils: properly stored	1 0.5 0	0	0	0
1 0.5 0	42	IN	OUT	& handled	1 0.5 0	0	8	0
Utensils and Equipment  10.5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	43	IÑ	OUT		1 0.5 0	0	0	0
45   N OUT   Equipment, food & non-food contact surfaces approved,   O O O O O O O O O O O O O O O O O O	44			Gloves used properly		0	0	0
45 IN OUT cleanable, properly designed, constructed, & used  46 S Warewashing facilities: installed, maintained, & used; 1 0.5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Ut	ensils	and Eq	uipment .2653, .2654, .2663				
40 IN OUT test strips  47 Non-food contact surfaces clean  Physical Facilities  2654, 2655, 2656  48 Nout Hot & cold water available; adequate pressure  49 Nout Plumbing installed; proper backflow devices  50 Nout Sewage & waste water properly disposed  51 Nout Sewage & waste water properly disposed  52 Nout Nout Rollet facilities: properly constructed, supplied & cleaned  52 Nout Sewage & refuse properly disposed; facilities maintained  53 Nout Physical facilities installed, maintained & clean  54 Nout Meets ventilation & lighting requirements; designated areas used	45	IÑ	OUT	cleanable, properly designed, constructed, & used	2 1 0	0	8	0
Physical Facilities  2654, .2655, .2656  48	46	IN	OŬT		1 0.5 0	0	0	0
48 N OUT Hot & cold water available; adequate pressure  49 N OUT Plumbing installed; proper backflow devices  50 N OUT Sewage & waste water properly disposed  51 N OUT Sewage & refuse properly disposed; facilities maintained  52 N OUT Garbage & refuse properly disposed; facilities maintained  53 N OUT Physical facilities installed, maintained & clean  54 N OUT Meets ventilation & lighting requirements; designated areas used	47			Non-food contact surfaces clean		0	0	0
46 IN OUT Hot & cold water available, adequate pressure  2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Pł		Faciliti	es .2654, .2655, .2656				
1	48	IN	OUT	Hot & cold water available; adequate pressure	2 1 0	0	0	0
Sewage & waste water properly disposed   2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	49	IN	OUT	Plumbing installed; proper backflow devices	2 1 0	0	8	0
51	50	IÑ	OUT		2 1 0	0	0	0
S2	51	IN	OUT	& cleaned	1 0.5 0	0	0	0
53 IN OUT Physical facilities installed, maintained & clean 1 0.5 0 0 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	52	IN	OUT		1 0.5 0	0	0	0
N OUT designated areas used 1 0.5 0 0 0	53			Physical facilities installed, maintained & clean		0	8	0
	54				○ ○ <b>⊗</b> 1 0.5 0	0	0	0
Total Deductions: 8.5				Total Deductions:	8.5			

North Carolina Department of Health & Human Services ● Division of Public Health
Environmental Health Section ● Food Protection Program

	Comment A	Adden	dum to	o Food	Establishmen	t Inspec	tion Report	
Establish	ment Name: PULLIAM S	8			Establishment ID:	3034020126	Date: 12/21/20	012
Location	on Address: 4400 OLD	WALKERTO	WN ROAD				Status Code:	Α
City: _	WINSTON-SALEM			te: NC			Category #:_	II
	y: 34 Forsyth	Zi	p: <del>27105</del>				Email 1:	
	ewater System:   Muni						Email 2:	
	Supply: ⊗ Muni ttee: _JS PULLIAMS INC	cipal/Commur	nity () On-S	Site System			Email 3:	
	hone:						Email 5.	
			Ter	nperature	Observations			
Item bbq	Location refrigerator	Temp 39	Item	Location	on Temp	Item	Location	Temp
hot water	2 comp. sink	155						
slaw	make unit	40						
slaw	frozen container	34						
hot dogs	hot holding on grill	156						
chili	hot holding	152						
bbq	hot holding	191						
respor relate Emplo freeze	yee health policy is not in assibility to report in according to diseases that are transfer that are transfer that are transfer to diseases that are transfer that are transfer to diseases that are as a few from food contact areas a few from from from from from from from from	dance with smissible t the table a nust be co	LAW, to the hrough FC displayed by the hrough FC displayed by the hrough the	the PERSON OOD, as spec here onions acup with a	I IN CHARGE, informat cified under ¶ 2-201.11( were being prepped. Er lid and straw to drink fro	ion about thei A). nployee beve om. Beverage	r health and activition rage found above for sare to be stored	es as they  ood in the under or
Ensure	e bare hand contact is el	iminated fr	om ready	to eat food.				
4 Chopp	er, plastic containers, ar	nd spoons I	needed ad	lditional clea	ning. Wash, rinse, and	sanitize utens	ils to remove food o	debris.

2

	Comment Addendum to Food Establishment	Inspection Report
Es	Establishment Name: PULLIAM S Establishmen	nt ID: 3034020126
Γ	Observations and Corrective Actions  Violations cited in this report must be corrected within the time frames below, or as stated in s	ections 8-405.11 of the food code.
21	·	te mark for 7 days if held at 41 F or below ers use by date whichever is shorter. For
26	Chemical bottle found unlabeled. Label chemical bottles with the name of the contents in	side.
27	Kraut slaw is a specialized process which uses vinegar to render it non-potentially hazard manager and approval will be determined.	ous. Information was provided by
30	<sup>30</sup> SEE #27	
35	Chili seasoning found unlabeled. Label dry food containers when removed from original p	packaging.
38	Ensure employees engaged in food prep wear jewelry that is limited to a ring such as a co	ommon wedding band only.
41	Lid and spoon was stored on clean side drainboard. Keep in use utensils stored on a clear of scoop found in onions. Keep handle out of product.	an surface other than drainboard. Handle



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: P	ULLIAM S	Establishment ID:	3034020126

### Observations and Corrective Actions

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	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.
42	Remove the clean crocks from being stored on top of the vinegar barrel.
43	Single use items stored uncovered in the back storage room. Keep single service items stored protected.
45	Replace or repair the wooden dunnage racks to be non absorbent, smooth and easily cleanable. Repair cracks on the bbq lids. Replace rusted shelving and adjust to be min. 12 inches above the floor. The prep sink, outside cooler, and 2 compartment sink do not meet easily cleanable standards. All equipment must be NSF or equal.
47	Clean dunnage racks, under prep sinks, and table bottom/legs.
49	At least 1 service sink or 1 curbed cleaning facility equipped with a floor drain shall be provided and conveniently located for the cleaning of mops or similar wet floor cleaning tools and for the disposal of mop water and similar liquid waste.
51	Caulk toilet to floor in the employee bathroom.
53	Floors, walls and ceilings must be constructed to be easily cleanable. Rough concrete, walls, and ceilings that are not totally sealed are not approved. Clean floors under shelving.



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: PULLIAM S Establishment ID: 3034020126

## **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.



Lighting low at prep table (25-43 f/c) and chopper (7 f/c). Provide 50 f/c at food prep areas.

