### Food Establishment Inspection Report

Establishment Name: WILCO 104 Establishment ID: 3034020543

Date: <u>Ø 2</u> / <u>15</u> / <u>2 Ø 1 3</u> Status Code: A						
Time In: <u>∅                                   </u>						
Total Time: 1 hr 30 minutes						
Category #: II						
Establishment Type:						

#### Instructions:

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

Location Add	ress: 5434 UNIVERSITY PKWY								
City: WINST	ON SALEM								
State: NC	Zip:								
County: 34 Forsyth									
Permittee: WILCO HESS LLC									
Telephone:									
⊗Inspection	⊗Inspection								
○Re-Inspec	○Re-Inspection								
Wastewater System:									
⊗Municipal/Community									
○On-Site System									
Water Supply:									
⊗Municipal/	'Community								
○On-Site S	ystem								

 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

- 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: 94

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

Public Health Interventions: Control measures to prevent foodborne illness or injury

Public Health Interventions: Control measures to prevent foodborne illness or injury.								
Со	mpliance Statu	s	OUT	CDI	R	VR		
Su	pervision	.2652						
1		PIC Present; Demonstration-Certification by accredited program and perform duties	○ <b>⊗</b> 2 0	0	0	0		
En	ployee Health	.2652						
2	⊗ ○ IN OUT	Management, employees knowledge; responsibilities & reporting	O O O 3 1.5 0	0	0	0		
3	⊗ ○ IN OUT	Proper use of reporting, restriction & exclusion	0 0 0 3 1.5 0	0	0	0		
Go	od Hygienic P	Practices .2652, .2653						
4	⊗ ○ IN OUT	Proper eating, tasting, drinking, or tobacco use	O O O 2 1 0	0	0	0		
5	Ø ○ IN OUT	No discharge from eyes, nose, and mouth	0 0 0	0	0	0		
Pro		amination by Hands .2652, .2653, .2655, .2656	6					
6	⊗ O IN OUT	Hands clean & properly washed	0 0 0 4 2 0	0	0	0		
7	O O S IN OUT N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly allowed	○ ○ ○ 3 1.5 0	0	0	0		
8	⊗ ○ IN OUT	Handwashing sinks supplied & accessible	0 0 0 2 1 0	0	0	0		
Ap	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 O S IN OUT N/O	Food received at proper temperature	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0		
11	⊗ ○ IN OUT	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0			
12	O O & O	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0			
Pro	otection from	Contamination .2653, .2654						
13	O O ⊗ O	Food separated & protected	0 0 0 3 1.5 0	0	0	0		
14	O & IN OUT	Food-contact surfaces: cleaned & sanitized	3 1.5 0 3 1.5 0	8	0	0		
15	⊗ ○ IN OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food	000	0	0	0		
Po	tentially Haza	rdous Food Time/Temperature .2653						
16	OOO ⊗ IN OUT N/A N/O	Proper cooking time & temperatures	○ ○ ○ 3 1.5 0	0	0	0		
17	⊗ ○ ○ ○ IN OUT N/A N/O	Proper reheating procedures for hot holding	○ ○ ○ 3 1.5 0	0	0	0		
18	OOO ⊗ IN OUT N/A N/O	Proper cooling time & temperatures	○ ○ ○ 3 1.5 0	0	0	0		
19	○ ⊗ ○ ○ IN OUT N/A N/O	Proper hot holding temperatures	○ <b>⊗</b> ○ 3 1.5 0	8	0	0		
20	⊗ ○ ○ ○ IN OUT N/A N/O	Proper cold holding temperatures	○ ○ ○ 3 1.5 0	0	0	0		
21	O O 🗞 O IN OUT N/A N/O	Proper date marking & disposition	○ ○ ○ 3 1.5 0	0	0	0		
22	O O & O IN OUT N/A N/O	Time as a public health control: procedures & records	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0		
Consumer Advisory .2653								
23	O O & IN OUT N/A	Consumer advisory provided for raw or undercooked foods	0 0 0 1 0.5 0	0	0	0		
Hiç	hly Susceptik	ple Populations .2653						
24	O O & IN OUT N/A	Pasteurized foods used; prohibited foods not offered	O O O 3 1.5 0	0	0	0		
Ch	emical	.2653, .2657						
25	O O & IN OUT N/A	Food additives: approved & properly used	0 0 0 1 0.5 0	0	0	0		
26	⊗ ○ ○ IN OUT N/A	Toxic substances properly identified stored, & used	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0		0	0		
Со		th Approved Procedures .2653, .2654,	.2658					
27	O O & IN OUT N/A	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	$\begin{array}{c} \bigcirc \bigcirc$		0	0		

### Food Establishment Inspection Report, continued

Establishment Name: WILCO 104 Establishment ID: 3034020543

nstri	ictions	, continu	ea:

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:

Janice B. Turney

Person in Charge (Print)

Jamin B. June

Person in Charge (Signature)

Regulatory Authority (Print)

Regulatory Authority (Signature)

Contact Number: (\_\_\_\_)\_\_\_-

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

REHS ID: 2259 - Michaud, Kenneth

No. of Risk Factor/ Intervention Violations: 3 No. of Repeat Risk Factor/Intervention Violations:

Good Retail Practices									
Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.									
	<u> </u>	ce Statu		(	DUT		CDI	R	VR
Sa	fe Foo	od and V	Vater .2653, .2655, .2658		0	$\overline{\Box}$			
28	IN	OUT	Pasteurized eggs used where required	1 (	0.5	-	0	0	0
29	⊗ IN		Water and ice from approved source	2	1	0	0	0	0
30		O <b>&amp;</b> UT N/A	Variance obtained for specialized processing methods		O 0.5	0	0	0	0
Fo		•	re Control .2653, .2654						
31	IN	OUT	Proper cooling methods used; adequate equipment for temperature control	1 (	0.5	0	0	0	0
32	O O	⊗ ○ FN/A N/O	Plant food properly cooked for hot holding	_	0.5	0	0	0	0
33	⊗ ○ IN OUT	O O N/A N/O	Approved thawing methods used		O 0.5	0	0	0	0
34	⊗ IN	OUT	Thermometers provided & accurate		O 0.5	0	0	0	0
Fo		ntificati	ion .2653						
35	⊗ IN	OUT	Food properly labeled: original container	) 2	0 1	0	0	0	0
Pr			ood Contamination .2652, .2653, .2654, .265	5, .2	$\overline{}$	$\overline{}$			
36	⊗ IN	OUT	Insects & rodents not present; no unauthorized animals	2	1	0	0	0	0
37	O IN	⊗ OUT	Contamination prevented during food preparation, storage & display	2	1	0	0	0	0
38	⊗ IN	OUT	Personal cleanliness		〇 0.5	0	0	0	0
39	⊗ IN	TOO_	Wiping cloths: properly used & stored	1	0.5	_	0	0	0
40	⊗ IN	OUT	Washing fruits & vegetables		〇 0.5	0	0	0	0
Pr	•	se of U	tensils .2653, .2654						
41	⊗ IN	OUT	In-use utensils: properly stored	1 (	0.5	_	0	0	0
42	⊗ IN	OUT	Utensils, equipment & linens: properly stored, dried & handled	1 (	0.5	0	0	0	0
43	IN	OUT	Single-use & single-service articles: properly torred & used 1 0.5 0					0	0
44	⊗ IN	OUT	Gloves used properly						0
Ut	ensils		uipment .2653, .2654, .2663	_					
45	O IN	⊗ OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2	1	0	0	0	0
46	IN	OUT	Warewashing facilities: installed, maintained, & used; test strips	1 (	0.5	0	0	0	0
47	O IN	⊗ OUT	Non-food contact surfaces clean		<b>⊗</b> 0.5		0	0	0
Ph		Faciliti	es .2654, .2655, .2656						
48	⊗ IN	OUT	Hot & cold water available; adequate pressure	) 2	<u> </u>	0	0	0	0
49	⊗ IN	OUT	Plumbing installed; proper backflow devices	2	1	0	0	0	0
50	⊗ IN	OUT	Sewage & waste water properly disposed	O 2	1	0	0	0	0
51	⊗ IN	OUT	Toilet facilities: properly constructed, supplied & cleaned	1 (	0.5	_	0	0	0
52	O IN	⊗ OUT	Garbage & refuse properly disposed; facilities maintained	1 (	<b>⊗</b> 0.5	0	0	0	0
53	⊗ IN	OUT	Physical facilities installed, maintained & clean	1 (	O 0.5	0	0	0	0
54	O IN	⊗ OUT	Meets ventilation & lighting requirements; designated areas used		O 0.5		0	0	0
			Total Deductions:	6					

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

		Comment Ad	dden	dum to	Food	Establ	ishmen <sup>:</sup>	t Inspe	ction Repor	t	
Es	Establishment Name: WILCO 104					Establishment ID: 3034020543			Date: 02/15/2013		
	Location	Address: 5434 UNIVER	RSITY PK	WY					Status Cod	e:A	
	City: WI	NSTON SALEM		State:	NC_				Category #	. 11	
	County:	34 Forsyth	Zi	ip: <del>27105</del>					Email 1:		
		ater System:   Municip							Email 2:		
	Water S Permitte	upply: ⊗ Municip ee: _WILCO HESS LLC	al/Commu	nity On-Site	System				Email 3:		
	Telepho								Liliali 3.		
				Temp	perature	Observa	ations				
Ite	n rnados	Location Roller	Temp 122	Item Chlorine	Locati	on in ppm	Temp 100	Item	Location	Temp	
_	g rolls	Roller	129		Dottic	пт ррпп					
	usage	Roller	136	-							
	ot dogs	Roller	142								
_	 aw	Condiment reach in	42								
H	ot dogs	Lower reach in cooler	41								
SI	aw	Reach in cooler	44								
Н	ot water	Three compartment sink	146								
Γ							ve Actions				
╷┖		Violations cited in this repor									
1		Certified Food Protection  SI approved food safety				ood safety o	course not pr	esent at tim	e of inspection - ma	inagers must	
	. = 0										
14		4 Manual and Mechanic s - No sanitizer present									
	sanitizer	which read 100 ppm of	chlorine	solution		·		·			
19		(A)(1) Potentially Hazar ot holding temp - all hot									
		ted to 165 deg F				<u> </u>			,		
37		Food Display-Preventing to Cooler still exposed of									

protected

## Comment Addendum to Food Establishment Inspection Report

Establishment Name: WILCO 104 Establishment ID: 3034020543

Observations	and Co	rractiva	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.

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45 4-501.11 Good Repair and Proper Adjustment-Equipment - Replace rusty storage rack over three compartment sink

- 47 4-602.13 Nonfood Contact Surfaces Detailed cleaning needed on gaskets and around condiments bins so they are clean and free from debris
- 52 5-501.115 Maintaining Refuse Areas and Enclosures Open dumpster door and lid missing on cardboard dumpster lids and doors must be shut at all times as to prevent pest and rodent harborage
- 6-305.11 Designation-Dressing Areas and Lockers Employee coat hanging on rack with soda syrup all employee personal items must be stored appropriately and away from food contact surfaces

Comment Addendum to Food Establishment Inspection Report

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#### **Observations and Corrective Actions**

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# Comment Addendum to Food Establishment Inspection Report

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### **Observations and Corrective Actions**

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