

Food Establishment Inspection Report

Score: 99

Establishment Name: KANGAROO EXPRESS #3160

Establishment ID: 3034020605

Date: 02 / 26 / 2013 Status Code: A

Time In: 09 : 50 am pm Time Out: 11 : 55 am pm

Total Time: 2 hrs 5 minutes

Category #: II

Establishment Type: _____

Instructions:

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

Location Address: 2471 LEWSVILLE CLEMMONS RD

City: CLEMMONS

State: NC Zip: 27012

County: 34 Forsyth

Permittee: THE PANTRY 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".

Foodborne Illness Risk Factors and Public Health Interventions								
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	
Supervision .2652								
1	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	<input type="radio"/> N/A	PIC Present: Demonstration-Certification by accredited program and perform duties	<input type="radio"/> 2	<input checked="" type="radio"/> 0	<input type="radio"/> 0	<input type="radio"/> 0
Employee Health .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"/> 0
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"/> 0
Good Hygienic Practices .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"/> 0
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"/> 0
Preventing Contamination by Hands .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"/> 0
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"/> 0
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"/> 0
Approved Source .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"/> 0
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"/> 0
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"/> 0
12	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	Required records available: shellstock tags, parasite destruction	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/> 0
Protection from Contamination .2653, .2654								
13	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Food separated & protected	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
14	<input type="radio"/> IN	<input checked="" type="radio"/> OUT		Food-contact surfaces: cleaned & sanitized	<input type="radio"/> 3	<input type="radio"/> 1.5	<input checked="" type="radio"/> 0	<input type="radio"/> 0
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"/> 0
Potentially Hazardous Food Time/Temperature .2653								
16	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Proper cooking time & temperatures	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
17	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	Proper reheating procedures for hot holding	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
18	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	Proper cooling time & temperatures	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
19	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Proper hot holding temperatures	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
20	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Proper cold holding temperatures	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
21	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Proper date marking & disposition	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
22	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	Time as a public health control: procedures & records	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/> 0
Consumer Advisory .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	<input type="radio"/> 0
Highly Susceptible Populations .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	<input type="radio"/> 0
Chemical .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	<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	<input type="radio"/> 0
Conformance with Approved Procedures .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	<input type="radio"/> 0



Food Establishment Inspection Report, continued

Establishment Name: KANGAROO EXPRESS #3160

Establishment ID: 3034020605

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:

Diana Fischer
Person in Charge (Print)

Diana Fischer
Person in Charge (Signature)

C. Kent Long
Regulatory Authority (Print)

CP7
Regulatory Authority (Signature)

Contact Number: (336) 703 - 3136

Verification Required Date: ___ / ___ / ___

REHS ID: 1158 - Long, C. Kentt

Good Retail Practices					
Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.					

Compliance Status		OUT	CDI	R	VR
Safe Food and Water .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"/>
Food Temperature Control .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 checked="" type="radio"/> N/A <input 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 type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" 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"/>
Food Identification .2653					
35	<input type="radio"/> IN <input checked="" type="radio"/> OUT Food properly labeled: original container	2	1	0	<input type="radio"/> <input type="radio"/> <input type="radio"/>
Prevention of Food Contamination .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 checked="" type="radio"/> IN <input type="radio"/> OUT Personal cleanliness	1	0.5	0	<input type="radio"/> <input type="radio"/> <input type="radio"/>
39	<input checked="" type="radio"/> IN <input type="radio"/> OUT Wiping cloths: properly used & stored	1	0.5	0	<input type="radio"/> <input 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"/>
Proper Use of Utensils .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"/>
Utensils and Equipment .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 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 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 type="radio"/> <input type="radio"/>
Physical Facilities .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 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 type="radio"/> <input type="radio"/> <input 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"/>
Total Deductions:		1			

No. of Risk Factor/
Intervention
Violations: 3

No. of Repeat Risk
Factor/Intervention
Violations:

Comment Addendum to Food Establishment Inspection Report

Establishment Name: KANGAROO EXPRESS #3160

Establishment ID: 3034020605

Date: 02/26/2013

Location Address: 2471 LEWSVILLE CLEMMONS RD

City: CLEMMONS State: NC

County: 34 Forsyth Zip: 27012

Wastewater System: Municipal/Community On-Site System

Water Supply: Municipal/Community On-Site System

Permittee: THE PANTRY INC

Telephone: _____

Status Code: A

Category #: II

Email 1: _____

Email 2: _____

Email 3: _____

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
hot water	out of tap at utensil sink	133						
slaw	iced down	35						
polish	roll a grill	145						
taquitos	roll a grill	135						
hot dogs	roll a grill	152						
chili/cheese	dispenser	144						
milk (gallons)	retail walk-in cooler	37						

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.

- 1 PIC should have taken ANSI certified sanitation class by January 1, 2014.
- 2 No employee health agreement available. (see hand out). All food service employees will need to acknowledge (sign) health policy.
- 14 QAC sanitizer 400ppm, should be around 200ppm. Cleaning ice machine (in fountain) while there.
- 35 Cappuccino mix in container (not labeled). Label container with product name.



Spell



Comment Addendum to Food Establishment Inspection Report

Establishment Name: KANGAROO EXPRESS #3160

Establishment ID: 3034020605

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.



- 45 Can wash faucet leaking.
- 46 Need stoppers (stoppers being used won't hold water in basins) for utensil sink.
- 47 Clean under counter cabinets, sinks, etc.
- 52 Dumpster side door left open. Keep dumpster doors closed.
- 53 Some floor cleaning in areas. Need to repaint stockroom/office walls (paint peeling) used to stored bulk single service items. Keep storage off floor (at least 6" inches) in food service storage areas, etc.

Comment Addendum to Food Establishment Inspection Report

Establishment Name: KANGAROO EXPRESS #3160

Establishment ID: 3034020605

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: KANGAROO EXPRESS #3160

Establishment ID: 3034020605

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.

