

# Food Establishment Inspection Report

Score: 97.5

Establishment Name: PIZZA HUT 2592

Establishment ID: 3034020770

Date: 03 / 11 / 2013 Status Code: A

Time In: 01 : 25  am  pm Time Out: 3 : 45  am  pm

Total Time: 2 hrs 20 minutes

Category #: II

Establishment Type: \_\_\_\_\_

**Instructions:**

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

Location Address: 5188 REIDSVILLE HIGHWAY

City: WALKERTOWN

State: NC Zip: 27051

County: 34 Forsyth

Permittee: NPC INTERNATIONAL

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".

<b>Foodborne Illness Risk Factors and Public Health Interventions</b>												
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	
<b>Supervision</b> .2652												
1	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	PIC Present: Demonstration-Certification by accredited program and perform duties				<input type="radio"/> 2	<input type="radio"/> 0	<input type="radio"/>	<input type="radio"/>	
<b>Employee Health</b> .2652												
2	<input checked="" type="radio"/> IN	<input type="radio"/> OUT		Management, employees knowledge; responsibilities & reporting				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/>	
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"/>	
<b>Good Hygienic Practices</b> .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"/>	
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"/>	
<b>Preventing Contamination by Hands</b> .2652, .2653, .2655, .2656												
6	<input type="radio"/> IN	<input checked="" type="radio"/> OUT		Hands clean & properly washed				<input type="radio"/> 4	<input type="radio"/> 2	<input checked="" type="radio"/> 0	<input checked="" type="radio"/>	
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"/>	
8	<input type="radio"/> IN	<input checked="" type="radio"/> OUT		Handwashing sinks supplied & accessible				<input type="radio"/> 2	<input checked="" type="radio"/> 1	<input type="radio"/> 0	<input checked="" type="radio"/>	
<b>Approved Source</b> .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"/>	
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"/>	
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"/>	
12	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	<input type="radio"/> N/O	Required records available: shellstock tags, parasite destruction				<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/>
<b>Protection from Contamination</b> .2653, .2654												
13	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input type="radio"/> N/O	Food separated & protected				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/>
14	<input checked="" type="radio"/> IN	<input type="radio"/> OUT		Food-contact surfaces: cleaned & sanitized				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/>	
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"/>	
<b>Potentially Hazardous Food Time/Temperature</b> .2653												
16	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input type="radio"/> N/O	Proper cooking time & temperatures				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/>
17	<input type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input checked="" type="radio"/> N/O	Proper reheating procedures for hot holding				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/>
18	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input type="radio"/> N/O	Proper cooling time & temperatures				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/>
19	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input type="radio"/> N/O	Proper hot holding temperatures				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/>
20	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input type="radio"/> N/O	Proper cold holding temperatures				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/>
21	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	<input type="radio"/> N/O	Proper date marking & disposition				<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/>
22	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	<input type="radio"/> N/O	Time as a public health control: procedures & records				<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/>
<b>Consumer Advisory</b> .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"/>
<b>Highly Susceptible Populations</b> .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"/>
<b>Chemical</b> .2653, .2657												
25	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input 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"/>
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"/>
<b>Conformance with Approved Procedures</b> .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"/>



# Food Establishment Inspection Report, continued

Establishment Name: PIZZA HUT 2592

Establishment ID: 3034020770

**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:**

Donald Merrin  
Person in Charge (Print)

Donald Merrin  
Person in Charge (Signature)

Anthony Williams  
Regulatory Authority (Print)

Anthony Williams  
Regulatory Authority (Signature)

Contact Number: ( ) -

Verification Required Date: / /

REHS ID: 1846 - Williams, Tony

No. of Risk Factor/  
Intervention  
Violations: 2

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

<b>Good Retail Practices</b>								
Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.								
Compliance Status					OUT	CDI	R	VR
<b>Safe Food and Water</b> .2653, .2655, .2658								
28	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Pasteurized eggs used where required	1	0.5	0		
29	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Water and ice from approved source	2	1	0		
30	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	1	0.5	0		
<b>Food Temperature Control</b> .2653, .2654								
31	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	Proper cooling methods used; adequate equipment for temperature control	1	0.5	0		
32	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	1	0.5	0		
33	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	1	0.5	0		
34	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Thermometers provided & accurate	1	0.5	0		
<b>Food Identification</b> .2653								
35	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	Food properly labeled: original container	2	1	0		
<b>Prevention of Food Contamination</b> .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		
37	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Contamination prevented during food preparation, storage & display	2	1	0		
38	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Personal cleanliness	1	0.5	0		
39	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Wiping cloths: properly used & stored	1	0.5	0		
40	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Washing fruits & vegetables	1	0.5	0		
<b>Proper Use of Utensils</b> .2653, .2654								
41	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	In-use utensils: properly stored	1	0.5	0		
42	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0		
43	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	Single-use & single-service articles: properly stored & used	1	0.5	0		
44	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Gloves used properly	1	0.5	0		
<b>Utensils and Equipment</b> .2653, .2654, .2663								
45	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2	1	0		
46	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Warewashing facilities: installed, maintained, & used; test strips	1	0.5	0		
47	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Non-food contact surfaces clean	1	0.5	0		
<b>Physical Facilities</b> .2654, .2655, .2656								
48	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Hot & cold water available; adequate pressure	2	1	0		
49	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	Plumbing installed; proper backflow devices	2	1	0		
50	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Sewage & waste water properly disposed	2	1	0		
51	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0		
52	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	0		
53	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Physical facilities installed, maintained & clean	1	0.5	0		
54	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0		
<b>Total Deductions:</b>				2.5				

# Comment Addendum to Food Establishment Inspection Report

**Establishment Name:** PIZZA HUT 2592  
**Location Address:** 5188 REIDSVILLE HIGHWAY  
**City:** WALKERTOWN **State:** NC  
**County:** 34 Forsyth **Zip:** 27051  
**Wastewater System:**  Municipal/Community  On-Site System  
**Water Supply:**  Municipal/Community  On-Site System  
**Permittee:** NPC INTERNATIONAL  
**Telephone:** \_\_\_\_\_

**Establishment ID:** 3034020770

**Date:** 03/11/2013  
**Status Code:** A  
**Category #:** II  
**Email 1:** \_\_\_\_\_  
**Email 2:** \_\_\_\_\_  
**Email 3:** \_\_\_\_\_

## Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
pep. pizza	hot holding	184						
sau. pizza	hot holding	167						
tomatoes	make unit	40						
chicken	make unit	36						
sauce	make unit	45						
hot water	3 comp. sink	135						
pizza	final cook	192						

## 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.

- 6 Employee coughed in hands and touched face without washing hands. Ensure hands are washed when contaminated. Manager educated on hand washing during inspection.
  
- 8 Hand sink was not supplied with paper towels. Keep hand sinks stocked with paper towels, soap and hot water above 100 F. Hand sink supplied with towels during inspection.
  
- 31 Sauces cooling in large portion in plastic containers. Employ methods to cool food rapidly by cooling items in thin, small portions, using ice paddles, and using metal containers rather than plastic. Loosely cover items in cooling.
  
- 35 Cooking oil and dry good found unlabeled. Label all dry goods including cooking oils with the name of the contents inside.



# Comment Addendum to Food Establishment Inspection Report

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## 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.



- 41 Scoop handles found in food product. Ensure handles are stored out of food product. Ensure in use utensils are washed every four hours.
- 42 Dishes were stacked wet. Air dry before stacking.
- 43 Single service trays stored improperly. Store single service inverted. Raise shelving 6 inches above the floor and remove soda crates used for storage.
- 49 Fixture did not have proper backflow prevention installed. Install backflow preventer made for continuous pressure at the mop sink.
- 52 Lid to garbage can left open. Keep lid closed.



# Comment Addendum to Food Establishment Inspection Report

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## 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



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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.

✓  
Spell

