

Food Establishment Inspection Report

Score: 94.5

Establishment Name: AMF WINSTON SALEM LANES

Establishment ID: 3034010768

Location Address: 811 JONESTOWN RD

City: WINSTON SALEM State: North Carolina

Zip: 27103 County: 34 Forsyth

Permittee: AMF BOWLING CENTERS INC.

Telephone: (336) 765-8009

Inspection Re-Inspection

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 06/20/2022 Status Code: A

Time In: 3:40 PM Time Out: 6:00 PM

Category#: II

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 3

No. of Repeat Risk Factor/Intervention Violations: 0

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 checked="" type="checkbox"/> OUT/N/A				
PIC Present, demonstrates knowledge, & performs duties		1	0		
2	<input checked="" type="checkbox"/> OUT/N/A				
Certified Food Protection Manager		1	0		
Employee Health .2652					
3	<input checked="" type="checkbox"/> OUT				
Management, food & conditional employee; knowledge, responsibilities & reporting		2	1	0	
4	<input checked="" type="checkbox"/> OUT				
Proper use of reporting, restriction & exclusion		3	1.5	0	
5	<input checked="" type="checkbox"/> IN				
Procedures for responding to vomiting & diarrheal events		1	0.5	X	X
Good Hygienic Practices .2652, .2653					
6	<input checked="" type="checkbox"/> OUT				
Proper eating, tasting, drinking or tobacco use		1	0.5	0	
7	<input checked="" type="checkbox"/> OUT				
No discharge from eyes, nose, and mouth		1	0.5	0	
Preventing Contamination by Hands .2652, .2653, .2655, .2656					
8	<input checked="" type="checkbox"/> OUT				
Hands clean & properly washed		4	2	0	
9	<input checked="" type="checkbox"/> OUT/N/A/N/O				
No bare hand contact with RTE foods or pre-approved alternate procedure properly followed		4	2	0	
10	<input checked="" type="checkbox"/> OUT/N/A				
Handwashing sinks supplied & accessible		2	1	0	
Approved Source .2653, .2655					
11	<input checked="" type="checkbox"/> OUT				
Food obtained from approved source		2	1	0	
12	<input checked="" type="checkbox"/> IN				
Food received at proper temperature		2	1	0	
13	<input checked="" type="checkbox"/> OUT				
Food in good condition, safe & unadulterated		2	1	0	
14	<input checked="" type="checkbox"/> IN				
Required records available: shellstock tags, parasite destruction		2	1	0	
Protection from Contamination .2653, .2654					
15	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Food separated & protected		3	1.5	0	
16	<input checked="" type="checkbox"/> IN				
Food-contact surfaces: cleaned & sanitized		3	X	0	X
17	<input checked="" type="checkbox"/> IN				
Proper disposition of returned, previously served, reconditioned & unsafe food		2	X	0	X
Potentially Hazardous Food Time/Temperature .2653					
18	<input checked="" type="checkbox"/> IN				
Proper cooking time & temperatures		3	1.5	0	
19	<input checked="" type="checkbox"/> IN				
Proper reheating procedures for hot holding		3	1.5	0	
20	<input checked="" type="checkbox"/> IN				
Proper cooling time & temperatures		3	1.5	0	
21	<input checked="" type="checkbox"/> IN				
Proper hot holding temperatures		3	1.5	0	
22	<input checked="" type="checkbox"/> OUT				
Proper cold holding temperatures		3	1.5	0	
23	<input checked="" type="checkbox"/> OUT				
Proper date marking & disposition		3	1.5	0	
24	<input checked="" type="checkbox"/> IN				
Time as a Public Health Control; procedures & records		3	1.5	0	
Consumer Advisory .2653					
25	<input checked="" type="checkbox"/> IN				
Consumer advisory provided for raw/undercooked foods		1	0.5	0	
Highly Susceptible Populations .2653					
26	<input checked="" type="checkbox"/> IN				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
Chemical .2653, .2657					
27	<input checked="" type="checkbox"/> IN				
Food additives: approved & properly used		1	0.5	0	
28	<input checked="" type="checkbox"/> OUT				
Toxic substances properly identified stored & used		2	1	0	
Conformance with Approved Procedures .2653, .2654, .2658					
29	<input checked="" type="checkbox"/> IN				
Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan		2	1	0	

Good Retail Practices

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					
30	<input checked="" type="checkbox"/> IN				
Pasteurized eggs used where required		1	0.5	0	
31	<input checked="" type="checkbox"/> OUT				
Water and ice from approved source		2	1	0	
32	<input checked="" type="checkbox"/> IN				
Variance obtained for specialized processing methods		2	1	0	
Food Temperature Control .2653, .2654					
33	<input checked="" type="checkbox"/> OUT				
Proper cooling methods used; adequate equipment for temperature control		1	0.5	0	
34	<input checked="" type="checkbox"/> IN				
Plant food properly cooked for hot holding		1	0.5	0	
35	<input checked="" type="checkbox"/> IN				
Approved thawing methods used		1	0.5	0	
36	<input checked="" type="checkbox"/> OUT				
Thermometers provided & accurate		1	0.5	0	
Food Identification .2653					
37	<input checked="" type="checkbox"/> OUT				
Food properly labeled: original container		2	1	0	
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657					
38	<input checked="" type="checkbox"/> OUT				
Insects & rodents not present; no unauthorized animals		2	1	0	
39	<input checked="" type="checkbox"/> OUT				
Contamination prevented during food preparation, storage & display		2	1	0	
40	<input checked="" type="checkbox"/> OUT				
Personal cleanliness		1	0.5	0	
41	<input checked="" type="checkbox"/> OUT				
Wiping cloths: properly used & stored		1	0.5	0	
42	<input checked="" type="checkbox"/> IN				
Washing fruits & vegetables		1	0.5	0	
Proper Use of Utensils .2653, .2654					
43	<input checked="" type="checkbox"/> OUT				
In-use utensils: properly stored		1	0.5	0	
44	<input checked="" type="checkbox"/> OUT				
Utensils, equipment & linens: properly stored, dried & handled		1	0.5	0	
45	<input checked="" type="checkbox"/> OUT				
Single-use & single-service articles: properly stored & used		1	0.5	0	
46	<input checked="" type="checkbox"/> OUT				
Gloves used properly		1	0.5	0	
Utensils and Equipment .2653, .2654, .2663					
47	<input checked="" type="checkbox"/> IN				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		1	0.5	X	
48	<input checked="" type="checkbox"/> OUT				
Warewashing facilities: installed, maintained & used; test strips		1	0.5	0	
49	<input checked="" type="checkbox"/> IN				
Non-food contact surfaces clean		X	0.5	0	X
Physical Facilities .2654, .2655, .2656					
50	<input checked="" type="checkbox"/> OUT				
Hot & cold water available; adequate pressure		1	0.5	0	
51	<input checked="" type="checkbox"/> OUT				
Plumbing installed; proper backflow devices		2	1	0	
52	<input checked="" type="checkbox"/> OUT				
Sewage & wastewater properly disposed		2	1	0	
53	<input checked="" type="checkbox"/> OUT				
Toilet facilities: properly constructed, supplied & cleaned		1	0.5	0	
54	<input checked="" type="checkbox"/> OUT				
Garbage & refuse properly disposed; facilities maintained		1	0.5	0	
55	<input checked="" type="checkbox"/> IN				
Physical facilities installed, maintained & clean		X	0.5	0	X
56	<input checked="" type="checkbox"/> IN				
Meets ventilation & lighting requirements; designated areas used		X	0.5	0	X
TOTAL DEDUCTIONS:					5.5



Comment Addendum to Food Establishment Inspection Report

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Establishment ID: 3034010768
 Inspection Re-Inspection Date: 06/20/2022
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: II
 Email 1:
 Email 2:
 Email 3:

Temperature Observations

Effective January 1, 2019 Cold Holding is now 41 degrees or less

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Chicken	make-unit	38.0						
Steak	make-unit	39.0						
Hotdog	make-unit	41.0						
Salsa	make-unit	41.0						
Sour Cream	make-unit	40.0						
Mozzarella	pizza make-unit	40.0						
Pizza Sauce	pizza make-unit	39.0						
Sausage	pizza make-unit	40.0						
Spring Mix	victory cooler	41.0						
Salsa	victory cooler	40.0						
Hot Water	3-compartment sink	129.0						
Quat Sani	3-compartment sink	200.0						
Serv Safe	Ric Thompson 10-27-26	000.0						

Person in Charge (Print & Sign): Jermone *First* Brown *Last*
 Regulatory Authority (Print & Sign): Victoria *First* Murphy *Last*




REHS ID: 2795 - Murphy, Victoria Verification Required Date: _____

REHS Contact Phone Number: (336) 703-3814



North Carolina Department of Health & Human Services

Division of Public Health
 Environmental Health Section
 Food Protection Program
 DHHS is an equal opportunity employer.



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Date: 06/20/2022 **Time In:** 3:40 PM **Time Out:** 6:00 PM

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.

- 5 2-501.11 Clean-up of Vomiting and Diarrheal Event-PF: There was no vomit or diarrhea clean-up plan in the establishment. Food establishment shall have written procedures for employees to follow when responding to vomiting or diarrhea events that involve the discharge of vomitus or fecal matter onto surfaces in the food establishment. The procedures shall address the specific actions employees must take to minimize the spread of contamination and the exposure of employees, consumers, food, and surfaces to vomitus or fecal matter. CDI: A clean-up plan was given to the establishment.
- 16 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils-PF: The following items were soiled in clean dish areas: 1 soiled knife, 2 soiled tongs, 1 pan, 1 drink nozzle, and 2 paddles. Food-contact surfaces shall be clean to sight and touch. CDI: All items were cleaned
- 17 3-701.11 Discarding or Reconditioning Unsafe, Adulterated, or Contaminated Food-P: Several limes were rotten in the upright cooler. (A) A food that is unsafe, adulterated, or not honestly presented as specified under § 3-101.11 shall be discarded or reconditioned according to an approved procedure. CDI: The limes were discarded.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment-C: Replace rusting floor grid under 3-compartment sink with hole exposed./replace utensils in bad repair. Equipment shall be maintained in good repair./4-501.12 Cutting Surfaces-C: Replace badly wearing cutting board on pizza station make-unit. Surfaces such as cutting blocks and boards that are subject to scratching and scoring shall be resurfaced if they can no longer be effectively cleaned and sanitized, or discarded if they are not capable of being resurfaced.
- 49 7 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils -REPEAT- C: Cleaning is needed to/on the following items: make-unit, reach-in cooler, beer cooler, shelves in walk-in cooler, fan covers in walk-in cooler, ceiling in walk-in cooler, upright freezer, and on outer surfaces of equipment. Equipment food-contact surfaces and utensils shall be clean to sight and touch.
- 55 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C: Replace damaged tiles. Physical facilities shall be maintained in good repair./6501.12 Cleaning, Frequency and Restrictions -REPEAT- C: Thorough cleaning is needed to/on all the floors along the baseboards and throughout the establishment and walls throughout the establishment and in walk-in cooler. Physical facilities shall be cleaned as often as necessary to keep them clean.
- 56 4 6-303.11 Intensity-Lighting -REPEAT- C: Lighting measured below the requirement in the following areas: pizza make-unit (20ft candles), pizza oven (18ft candles), hand sink (7ft candles), bar hand sink (16 ft candles), (women's restroom) 6th stall (7 foot candles), sinks (9 foot candles),5th stall (4foot candles), 3rd stall (11 foot candles), (men's restroom) urinal (8 foot candles), 2 last sinks (16ft-18 foot candles), 1st stall (2 foot candles). The light intensity shall be at least 20 foot candles at least 30 inches above the floor in areas used for handwashing, and at least 50 foot candles at a surface where a food employee is working food or working with utensils or equipment such as knives, slicers, grinders, or saws where employee safety is a factor.