

# Food Establishment Inspection Report

Score: 96

Establishment Name: LEDO'S PIZZA Establishment ID: 3034012618  
 Location Address: 220 MARKET VIEW DR. SUITE F  Inspection  Re-Inspection  
 City: KERNERSVILLE State: NC Date: 01/12/2021 Status Code: A  
 Zip: 27284 County: 34 Forsyth Time In: 10:30 AM Time Out: 1:15 PM  
 Permittee: ALAN C ENTERPRISES, LLC Total Time: 2 hrs 45 min  
 Telephone: (336) 993-5336 Category #: IV  
 Wastewater System:  Municipal/Community  On-Site System  
 Water Supply:  Municipal/Community  On-Site Supply  
 FDA Establishment Type: \_\_\_\_\_  
 No. of Risk Factor/Intervention Violations: 3  
 No. of Repeat Risk Factor/Intervention Violations: 1

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

Good Retail Practices						
Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.						
IN	OUT	N/A	NO	Compliance Status	OUT	CDI
<b>Safe Food and Water</b> .2653, .2655, .2658						
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required	<input checked="" type="checkbox"/>	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	<input checked="" type="checkbox"/>	<input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Food Temperature Control</b> .2653, .2654						
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="checkbox"/>	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	<input checked="" type="checkbox"/>	<input type="checkbox"/>
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	<input checked="" type="checkbox"/>	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Food Identification</b> .2653						
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Prevention of Food Contamination</b> .2652, .2653, .2654, .2656, .2657						
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals	<input checked="" type="checkbox"/>	<input type="checkbox"/>
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	<input checked="" type="checkbox"/>	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	<input checked="" type="checkbox"/>	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	<input checked="" type="checkbox"/>	<input type="checkbox"/>
40	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Washing fruits & vegetables	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Proper Use of Utensils</b> .2653, .2654						
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	<input checked="" type="checkbox"/>	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	<input checked="" type="checkbox"/>	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	<input checked="" type="checkbox"/>	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Utensils and Equipment</b> .2653, .2654, .2663						
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	<input checked="" type="checkbox"/>	<input type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="checkbox"/>	<input type="checkbox"/>
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Physical Facilities</b> .2654, .2655, .2656						
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure	<input checked="" type="checkbox"/>	<input type="checkbox"/>
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	<input checked="" type="checkbox"/>	<input type="checkbox"/>
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	<input checked="" type="checkbox"/>	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	<input checked="" type="checkbox"/>	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	<input checked="" type="checkbox"/>	<input type="checkbox"/>
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Total Deductions:</b>						<b>4</b>



# Comment Addendum to Food Establishment Inspection Report

**Establishment Name:** LEDO'S PIZZA  
**Location Address:** 220 MARKET VIEW DR. SUITE F  
**City:** KERNERSVILLE **State:** NC  
**County:** 34 Forsyth **Zip:** 27284  
**Wastewater System:**  Municipal/Community  On-Site System  
**Water Supply:**  Municipal/Community  On-Site System  
**Permittee:** ALAN C ENTERPRISES, LLC  
**Telephone:** (336) 993-5336

**Establishment ID:** 3034012618  
 Inspection  Re-Inspection **Date:** 01/12/2021  
**Comment Addendum Attached?**  **Status Code:** A  
**Water sample taken?**  Yes  No **Category #:** IV  
**Email 1:** ledo.kernersville@gmail.com  
**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
ham	delivery	39	wings	walk in cooler	37			
wings	salad prep	39	raw bacon	walk in cooler	38			
pizza	cook temp	203	quat sanitizer	bucket	300			
calzone	cook temp	189	quat sanitizer	dispenser	300			
alfredo sauce	hot holding	171	chlorine	dish machine	100			
chicken	pizza prep	38	milk	bar cooler	40			
cheese	pizza prep	39	air temp	dessert cooler	36			
hot water	3 compartment sink	147						

**Person in Charge (Print & Sign):** Kristina *First* Rich *Last*  
**Regulatory Authority (Print & Sign):** Amanda *First* Taylor *Last*

*Kristina Rich*

*Amanda Taylor*

REHS ID: 2543 - Taylor, Amanda

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

REHS Contact Phone Number: (336) 703-3136



North Carolina Department of Health & Human Services

• Division of Public Health • Environmental Health Section

• Food Protection Program



# Comment Addendum to Food Establishment Inspection Report

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**Establishment ID:** 3034012618

## 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 2-102.12 Certified Food Protection Manager - C At least one employee who has supervisory and management responsibility and the authority to direct and control food preparation and service shall be a certified food protection manager. No certified food protection manager on duty.
- 2-103.11 (A)-(L)Person-In-Charge-Duties - PF Delivery arrived at beginning of inspection containing TCS foods. PIC did not take delivery temperature. PIC shall ensure rules in the code for food safety and handling are met. CDI. PIC educated. EHS took delivery temperature.
- 6 2-301.14 When to Wash - P 0 points. Food employee observed washing hands then using bare hands to turn off faucet. Food employees shall use paper towels to turn off faucet after hand washing to avoid re-contaminating hands. CDI. Employee washed using correct procedure. Food employees must wash hands after engaging in activities that contaminate the hands. P
- 8 5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF Repeat. Front hand sink blocked by large rolling dough container. Maintain access to hand sinks. CDI. Container relocated.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C 0 points. All equipment issues from last inspection have been addressed. Replaced damaged onion chopper. Address ice buildup in worktop freezer. Repair/replace torn gasket on middle door of pizza prep unit. Equipment shall be in good repair.
- 53 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C 0 points. All floors, walls and ceilings violations from last inspection have been addressed. Seal exposed particle board on back of counter where front of house meets back of house. Physical facilities shall be in good repair.