

Food Establishment Inspection Report

Score: 97

Establishment Name: BOJANGLES #2042

Establishment ID: 3034012732

Location Address: 2468 MARKET CENTER DR.
 City: CLEMMONS State: North Carolina
 Zip: 27012 County: 34 Forsyth
 Permittee: BOJANGLES RESTAURANTS, INC.
 Telephone: (336) 766-0168

Date: 05/20/2022 Status Code: A
 Time In: 11:45 AM Time Out: 1:40 PM
 Category#: III
 FDA Establishment Type: Fast Food Restaurant
 No. of Risk Factor/Intervention Violations: 2
 No. of Repeat Risk Factor/Intervention Violations: 1

- Inspection Re-Inspection
- Wastewater System:**
 Municipal/Community On-Site System
- Water Supply:**
 Municipal/Community On-Site Supply

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"/> IN/ <input checked="" type="checkbox"/> N/A	Certified Food Protection Manager	<input checked="" type="checkbox"/>	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"/> OUT	Procedures for responding to vomiting & diarrheal events	1	0.5	0
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"/> IN/ <input checked="" type="checkbox"/> N/A	Handwashing sinks supplied & accessible	2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Approved Source .2653, .2655					
11	<input checked="" type="checkbox"/> OUT	Food obtained from approved source	2	1	0
12	<input checked="" type="checkbox"/> IN/ <input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A	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/ <input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A/N/O	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"/> OUT	Food-contact surfaces: cleaned & sanitized	3	1.5	0
17	<input checked="" type="checkbox"/> OUT	Proper disposition of returned, previously served, reconditioned & unsafe food	2	1	0
Potentially Hazardous Food Time/Temperature .2653					
18	<input checked="" type="checkbox"/> IN/ <input checked="" type="checkbox"/> OUT/N/A/ <input checked="" type="checkbox"/> N/O	Proper cooking time & temperatures	3	1.5	0
19	<input checked="" type="checkbox"/> IN/ <input checked="" type="checkbox"/> OUT/N/A/ <input checked="" type="checkbox"/> N/O	Proper reheating procedures for hot holding	3	1.5	0
20	<input checked="" type="checkbox"/> IN/ <input checked="" type="checkbox"/> OUT/N/A/ <input checked="" type="checkbox"/> N/O	Proper cooling time & temperatures	3	1.5	0
21	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper hot holding temperatures	3	1.5	0
22	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cold holding temperatures	3	1.5	0
23	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper date marking & disposition	3	1.5	0
24	<input checked="" type="checkbox"/> OUT/N/A/N/O	Time as a Public Health Control; procedures & records	3	1.5	0
Consumer Advisory .2653					
25	<input checked="" type="checkbox"/> IN/ <input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A	Consumer advisory provided for raw/undercooked foods	1	0.5	0
Highly Susceptible Populations .2653					
26	<input checked="" type="checkbox"/> IN/ <input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A	Pasteurized foods used; prohibited foods not offered	3	1.5	0
Chemical .2653, .2657					
27	<input checked="" type="checkbox"/> IN/ <input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A	Food additives: approved & properly used	1	0.5	0
28	<input checked="" type="checkbox"/> OUT/N/A	Toxic substances properly identified stored & used	2	1	0
Conformance with Approved Procedures .2653, .2654, .2658					
29	<input checked="" type="checkbox"/> IN/ <input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A	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/ <input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A/ <input checked="" type="checkbox"/> N/O	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/ <input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A	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/ <input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A/ <input checked="" type="checkbox"/> N/O	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A/N/O	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"/> OUT/N/A	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/ <input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	<input checked="" type="checkbox"/>
48	<input checked="" type="checkbox"/> IN/ <input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A	Warewashing facilities: installed, maintained & used; test strips	1	0.5	<input checked="" type="checkbox"/>
49	<input checked="" type="checkbox"/> IN/ <input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A	Non-food contact surfaces clean	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Physical Facilities .2654, .2655, .2656					
50	<input checked="" type="checkbox"/> OUT/N/A	Hot & cold water available; adequate pressure	1	0.5	0
51	<input checked="" type="checkbox"/> IN/ <input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A	Plumbing installed; proper backflow devices	2	1	<input checked="" type="checkbox"/>
52	<input checked="" type="checkbox"/> OUT	Sewage & wastewater properly disposed	2	1	0
53	<input checked="" type="checkbox"/> OUT/N/A	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/ <input checked="" type="checkbox"/> OUT/ <input checked="" type="checkbox"/> N/A	Physical facilities installed, maintained & clean	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
56	<input checked="" type="checkbox"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0
TOTAL DEDUCTIONS:					3



Comment Addendum to Food Establishment Inspection Report

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 City: CLEMMONS State: NC
 County: 34 Forsyth Zip: 27012
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: BOJANGLES RESTAURANTS, INC.
 Telephone: (336) 766-0168

Establishment ID: 3034012732
 Inspection Re-Inspection Date: 05/20/2022
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: III
 Email 1: afulk@bojangles.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
shredded cheese	cold well at makeline	41						
pimento cheese	ref. drawer	40						
salad greens	ref. drawer	41						
green beans	steam well	168						
chicken tender	hot hold	174						
fried chicken	hot hold	143						
fries	hot hold	180						
macaroni and cheese	steam well	160						
butter cup	small cooler behind front counter	39						
ambient air	biscuit cooler	39						
sausage	heated drawer	144						
chicken	heated drawer	165						
batter	chicken breeding station	30						
pimento cheese	walk-in cooler	37						
hot water	3 comp sink (R faucet)	136						
quat sani	3 comp sink (ppm)	300						
quat sani	towel buckets (ppm)	200						

Person in Charge (Print & Sign): Ashley *First* *Last* Wilson *Ashley Wilson*

Regulatory Authority (Print & Sign): Aubrie *First* *Last* Welch *Aubrie Welch REHS*

REHS ID: 2519 - Welch, Aubrie Verification Required Date: _____

REHS Contact Phone Number: (336) 703-3131



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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Comment Addendum to Inspection Report

Establishment Name: BOJANGLES #2042

Establishment ID: 3034012732

Date: 05/20/2022 **Time In:** 11:45 AM **Time Out:** 1:40 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.

- 2 2-102.12 (A) Certified Food Protection Manager (C) No employees working today had documentation of food safety training. The person in charge shall be a certified food protection manager who has shown proficiency of required information through passing a test that is part of an accredited program.
- 10 5-205.11 Using a Handwashing Sink - Operation and Maintenance (Pf) REPEAT - At beginning of inspection, container of bo-berries was sitting on edge of back hand sink. A handwashing sink shall be maintained so that it is accessible at all times for employee use. CDI - Bo-berries moved.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) REPEAT - Remove loose strip of caulk above refrigerated drawer holding liquid eggs, and replace. Equipment shall be maintained in good repair.
- 48 4-501.14 Warewashing Equipment, Cleaning Frequency (C) Buildup inside tea prep sink. The compartments of sinks, basins, or other receptacles used for washing and rinsing equipment, utensils, or raw foods, and drainboards shall be cleaned before use; throughout the day at a frequency necessary to prevent recontamination of equipment and utensils.
- 49 4-602.13 Nonfood Contact Surfaces (C) REPEAT - Continue to work on cleaning, such as under/around heated drawers. Improvement noted from last inspection. Nonfood contact surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues.
- 51 5-203.14 Backflow Prevention Device, When Required (P) Spray nozzle attached to hose at can wash without proper backflow prevention. If spray nozzle is to remain attached to hose, a backflow preventer rated for continuous pressure needs to be installed after the valve. CDI - PIC removed spray nozzle; discussion about backflow preventer.
5-205.15 (B) – System Maintained in Good Repair - hot water faucet at left faucet of 3 comp sink is not working. (note: wash compartment of sink is able to be filled with hose attached to chemical tower on right faucet). A plumbing system shall be maintained in good repair.
- 55 6-501.12 Cleaning, Frequency and Restrictions (C) REPEAT - Continue to work on cleaning, such as ceiling vents with flour/dust buildup. Physical facilities shall be cleaned as often as necessary to keep them clean.