## Food Establishment Inspection Report

Establishment	Name:D	UNKIN D	ONUTS

	L	oca	atio	on /	Address: 2817 REYNOLDA RD						
	С	City:	W	'IN	STON SALEM State: North Ca	ro	lina	a			
	Zip: 27106 County: 34 Forsyth										
					e: REYNOLDA RD WINSTON SALEM, L	L	С				
					ne: (954) 980-3928						
			-			Ec	luc	at	iona	l V	isit
	v				ater System:						
	-				nicipal/Community On-Site System						
	v	<u> </u>			ipply:						
	•				icipal/Community On-Site Supply						
=											
	Fc	bod	bo	rne	e Illness Risk Factors and Public Health I	nt€	erv	er	ntion	s	
					Contributing factors that increase the chance of developing foo				ness.		
					Interventions: Control measures to prevent foodborne illness	Т				_	
0	0	mp	lia	nc	e Status		OUT	Γ	CDI	R	VR
S	upe	ervis	ion		.2652	_					
1	X	оит	N/A		PIC Present, demonstrates knowledge, & performs duties	1		0			
2	X	ουτ	N/A		Certified Food Protection Manager	1		0			
E	mp	loye	еH	ealt		_					
3	Ņ	оит			Management, food & conditional employee; knowledge, responsibilities & reporting	2	1	0			
4	K	оит			Proper use of reporting, restriction & exclusion	3	1.5	0			
5	Ж	оит			Procedures for responding to vomiting & diarrheal events	1	0.5	0			
G	00	d Hy	gie	nic	Practices .2652, .2653	_					
6 7	1.	OUT OUT			Proper eating, tasting, drinking or tobacco use No discharge from eyes, nose, and mouth	1 1	0.5	0			
		1	1a (	Cont	tamination by Hands .2652, .2653, .2655, .265	-	0.5	0			
8	-	ОЛТ			Hands clean & properly washed	4	2	0			
9	IN	оит	N/A	NX0	No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	4	2	0			
10	M	оит	N/A		Handwashing sinks supplied & accessible	2	1	0			
A	ppr	rove	d S	ouro	ce .2653, .2655						
	1 · ·	OUT			Food obtained from approved source	2	1	0			
12 13		OUT OUT		N¥¢	Food received at proper temperature Food in good condition, safe & unadulterated	2	1	0			
14	<u> </u>	оит	NXA	N/O	Required records available: shellstock tags,	2	1	0			
					parasite destruction	Ĺ	1	Ŭ			
					Contamination         .2653, .2654           Food separated & protected	3	1.5	0			
		OUT			Food-contact surfaces: cleaned & sanitized		1.5				
17	X	оит			Proper disposition of returned, previously served, reconditioned & unsafe food	2	1	0			
P	ote	ntial	ly F	laza	ardous Food Time/Temperature .2653	-	-				
18	IN	ουτ	×	N/O	Proper cooking time & temperatures	3	1.5	-			
	-	OUT OUT				3 3	1.5 1.5	-			
	-	OUT	<u> </u>		Proper hot holding temperatures	3	1.5				
	1.	OUT				3 3	1.5	0			
		OUT			Time as a Public Health Control; procedures &		1.5	0			$\vdash$
		OUT			records	3	1.5	0			
	-		_	_	sory .2653 Consumer advisory provided for raw/	Т					
25	IN	оит	NA		undercooked foods	1	0.5	0			
Н	igh	ly Si	usc	epti	ble Populations .2653	_					
26	IN	оит	ŊXA		Pasteurized foods used; prohibited foods not offered	3	1.5	0			
	-	nica	_		.2653, .2657						
		OUT OUT	· ·		Food additives: approved & properly used Toxic substances properly identified stored & used	1 2	0.5	0			[-]
	-				ith Approved Procedures .2653, .2654, .2658	14		5			
		оит			Compliance with variance, specialized process,	2	1	0			
	<u> </u>				reduced oxygen packaging criteria or HACCP plan	1	1	ľ			

Establishment ID: 3	3034012769

Date:03/18/2025	_Status Code: A
Time In: 1:09 PM	_Time Out: _2:56 PM
Category#: II	
FDA Establishment Type	Fast Food Restaurant

No. of Risk Factor/Intervention Violations: 0 No. of Repeat Risk Factor/Intervention Violations: 0

					Good Retail Practices						
	Go	bod	Reta	ail Pi	ractices: Preventative measures to control the addition of pa	tho	gens	, cł	nemica	als,	
					and physical objects into foods.						_
С	on	npl	iar	ice	Status		OUT	Г	CDI	R	١
Saf	fe I	Food	d an	d Wa	ater .2653, .2655, .2658						
	<u> </u>	OUT	N/A		Pasteurized eggs used where required	1	0.5	0			
31	X	OUT			Water and ice from approved source	2	1	0			
32	IN	оит	¢¥A		Variance obtained for specialized processing methods	2	1	0			
Fo	od	Ten	nper	atur	e Control .2653, .2654						
33	X	оит			Proper cooling methods used; adequate equipment for temperature control	1	0.5	0			
34	IN	OUT	Ŋ¥(A	N/O	Plant food properly cooked for hot holding	1	0.5	0			
35	X	OUT	N/A	N/O	Approved thawing methods used	1	0.5	0			
36	X	OUT			Thermometers provided & accurate	1	0.5	0			
Fo	od	Ide	ntifie	catio	n .2653						
37	X	OUT			Food properly labeled: original container	2	1	0			Γ
				fFoo	od Contamination .2652, .2653, .2654, .2656, .26	57					
38	M	оит			Insects & rodents not present; no unauthorized animals	2	1	0			Γ
39	M	оит			Contamination prevented during food preparation, storage & display	2	1	0			
40	M	оит			Personal cleanliness	1	0.5	0		$\square$	⊢
	· •	OUT			Wiping cloths: properly used & stored	1	0.5	0			
42	IN	оит	NXA		Washing fruits & vegetables	1	0.5	0			
Pro	ope	er Us	se o	f Ute	ensils .2653, .2654						
43	M	оит			In-use utensils: properly stored	1	0.5	0			Γ
44	M	оит			Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0			
45	M	оит			Single-use & single-service articles: properly stored & used	1	0.5	0			
46	M	OUT			Gloves used properly	1	0.5	0			
Ute	ens	sils a	and	Equi	ipment .2653, .2654, .2663						
47	IN	<b>?X</b> ™			Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	ð%5	0			
48	M	оит			Warewashing facilities: installed, maintained & used; test strips	1	0.5	0			
49	M	OUT			Non-food contact surfaces clean	1	0.5	0			
Ph	ysi	ical	Faci	litie	s .2654, .2655, .2656						
50	M	OUT	N/A		Hot & cold water available; adequate pressure	1	0.5	0			Γ
		OUT			Plumbing installed; proper backflow devices	2	1	0			
52	M	OUT			Sewage & wastewater properly disposed	2	1	0			Ĺ
53	M	оит	N/A		Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0			
		¢%(⊤			Garbage & refuse properly disposed; facilities maintained	1	0X5	-		X	
55	IN	0)(т			Physical facilities installed, maintained & clean	X	0.5	0		Х	-
		26			Meets ventilation & lighting requirements;	1		L			
56	IN	OX(1			designated areas used TOTAL DEDUCTIONS:	1	0X5	0			



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# Comment Addendum to Food Establishment Inspection Report

Establishment Name: DUNKIN DONUTS		Establishment ID: 3034012769				
Location Address: <u>2817 REYNOLDA RD</u> City: <u>WINSTON SALEM</u>	State:NC	X Inspection	•	Date: <u>03/18/2025</u> Status Code: <u>A</u>		
County: <u>34 Forsyth</u> Z	ip: <u>27106</u>	Comment Addendum	Attached? X	Category #: II		
Wastewater System: X Municipal/Community On-S Water Supply: X Municipal/Community On-S		Email 1:hstraz@ddc	oastal.com			
Permittee: REYNOLDA RD WINSTON SALE	M, LLC	Email 2:				
Telephone: <u>(954) 980-3928</u>		Email 3:				

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acon/Make Unit ggs/Make Unit	40				
ggs/Make Unit					
	39				
ausage/Make Unit	40				
ggs/Make Unit	39				
ilk/Walk in Cooler	40				
ggs/Walk in Cooler	39				
ot water/3 comp sink	130				
anitizer Quat/3 comp sink	300				
	First	Last			
Person in Charge (Print & Sign):				MA T	
	First	Last		from materia	
egulatory Authority (Print & Sign):	Tamaya	Francis		() un apportances	
EHS ID:3432 - Francis, Tamaya		Verification Dates: Priority:	Pi	riority Foundation: C	Core:
EHS Contact Phone Number: (336)	830-2394		orize final re eceived via		

#### Establishment Name: DUNKIN DONUTS

#### Establishment ID: 3034012769

Date: 03/18/2025 Time In: 1:09 PM Time Out: 2:56 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.

- 47 4-501.11 Good Repair and Proper Adjustment Equipment (C). Dishrack by 3 comp sink is starting to rust and fan guard cleaning in walk in cooler.. Equipment shall be maintained in a state of repair and condition that meets the requirements specified under Parts 4-1 and 4-2.
- 54 5-501.113 Covering Receptacles-REPEAT-: Dumpster door open. Receptacles and waste handling units for refuse, recyclables, and returnables shall be kept covered
- 55 6-501.11 Repairing Premises, Structures, Attachments, and Fixtures Methods-REPEAT-C: Remove moldy caulk from 3compartment sink and recaulk/replace tiles in the can wash. Physical facilities shall be maintained in good repair.//6-501.12 Cleaning, Frequency and Restrictions- REPEAT : Cleaning is needed to/on the following: inside floor drains and floors behind/under equipment. Physical shall be cleaned as often as necessary to keep them clean.
- 56 6-303.11 Intensity Lighting (C). In the walk in freezer the lighting was 3 foot candles. The light intensity shall be: At least 108 lux (10 foot candles) at a distance of 75 cm (30 inches) above the floor, in walk-in refrigeration units and dry FOOD storage areas and in other areas and rooms during periods of cleaning.