## Food Establishment Inspection Report

Establishment	Name: SPEEDWAY 8202

Location Address: 4301 STYERS FERRY ROAD							
City: WINSTON SALEM State: North Carolina							
Zip: 27104 County: 34 Forsyth							
Permittee: SPEEDWAY, LLC							
Telepho	ne: <u>(</u> 336) 945-0507						
🚫 Insp	Dection O Re-Inspection O I	Ξc	luc	at	iona	١V	isit
Wastewa	ater System:						
🚫 Mu	nicipal/Community On-Site System						
Water S							
🚫 Mur	nicipal/Community On-Site Supply						
Foodborn	e Illness Risk Factors and Public Health Ir	nte	erve	en	tion	s	
Risk factors:	Contributing factors that increase the chance of developing foo	db	orne	illn	ess.		
Public Health	Interventions: Control measures to prevent foodborne illness	or	injur	y			
Compliand	e Status	(	OUT	Г	CDI	R	VR
Supervision	.2652	_					
	PIC Present, demonstrates knowledge, & performs duties	1		0			
2 IN 0XT N/A	Certified Food Protection Manager	1		X			
Employee Heal	th .2652	-			I		
3 IX OUT	Management, food & conditional employee; knowledge, responsibilities & reporting	2	1	0			
4 (X) OUT	Proper use of reporting, restriction & exclusion	3	1.5	0	_		
5 ін ожт	Procedures for responding to vomiting & diarrheal events	1	0)\$6	0		Х	
Good Hygienic	Practices .2652, .2653	-					
6 IX OUT	Proper eating, tasting, drinking or tobacco use	1		0			
	No discharge from eyes, nose, and mouth	1	0.5	0			
8 X OUT	tamination by Hands .2652, .2653, .2655, .2654 Hands clean & properly washed	4	2	0			
	No bare hand contact with RTE foods or pre-	4	2	0			
	approved alternate procedure properly followed Handwashing sinks supplied & accessible	2	1	0			
Approved Sour		_					
11 🗶 оит	Food obtained from approved source	2	1	0			
12 IN OUT NX	Food received at proper temperature Food in good condition, safe & unadulterated	2	1	0			
	Required records available: shellstock tags	2	1	0			
	parasite destruction	2	1	0			
	Contamination .2653, .2654     Food separated & protected	12	1.5				
15 X OUT N/AN/C	Food-contact surfaces: cleaned & sanitized	3	1.5 1.5	0			
17 X OUT	Proper disposition of returned, previously served,	2	1	0			
	reconditioned & unsafe food ardous Food Time/Temperature .2653						
18 IN OUT NAN/C	Proper cooking time & temperatures	_	1.5				
	Proper reheating procedures for hot holding Proper cooling time & temperatures	3 3	1.5 1.5				
21 IN OUT NANK		3	1.5				
22 X OUT N/AN/C		3	1.5				
	Time as a Public Health Control: procedures &	3					
	records	3	1.5	0			
Consumer Adv	isory .2653 Consumer advisory provided for raw/	-	6-				
25 IN OUT NA	undercooked foods	1	0.5	0			
	ible Populations .2653 Pasteurized foods used; prohibited foods not						
	offered	3	1.5	0			
Chemical	.2653, .2657	17	0.5				
27 IN OUT NA	Food additives: approved & properly used Toxic substances properly identified stored & used	1 2	0.5	0			
	vith Approved Procedures .2653, .2654, .2658	<u> </u>		<u> </u>			
29 IN OUT NA	Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan	2	1	0			
	North Carolina Department of Health &	H	Ima		onvice		livicio

### Establishment ID: 3034020660

Date: 06/09/2025	Status Code: A					
Time In: <u>1:20 PM</u>	_Time Out: 2:30 PM					
Category#: II						
FDA Establishment Type: Fast Food Restaurant						

No. of Risk Factor/Intervention Violations: 2 No. of Repeat Risk Factor/Intervention Violations: 1

	G	ood	Reta	ail Pi	Good Retail Practices ractices: Preventative measures to control the addition of pa	tho	gens	, ch	nemica	als,	
С	or	npl	iar	nce	and physical objects into foods. Status	Т	OUT	г	CDI	R	۷
		-		d Wa							-
					,,,	1.4	0.5	0			
3U 31	IN N	OUT OUT	19KA		Pasteurized eggs used where required Water and ice from approved source	1 2	0.5	0 0			
	~	001				-	1	0		$\square$	_
32	IN	ουτ	¢¥A		Variance obtained for specialized processing methods	2	1	0			
Fo	ood	Ten	nper	atur	e Control .2653, .2654						
33	×	оυт			Proper cooling methods used; adequate equipment for temperature control	1	0.5	0			
34	IN	оυт	N/A	NX0	Plant food properly cooked for hot holding	1	0.5	0			
35	_	оυт	<u> </u>		Approved thawing methods used	1	0.5	0			
36	Ņ	оυт			Thermometers provided & accurate	1	0.5	0			
Fo	ood	Ide	ntifio	catio	n .2653						
37	)X	оит			Food properly labeled: original container	2	1	0			
				f For	od Contamination .2652, .2653, .2654, .2656, .26	-			L		_
38		олт			Insects & rodents not present; no unauthorized	2	1	0			
-	••		-		animals	4	1	0		$\vdash$	
39		<b>%(</b> ⊺			Contamination prevented during food preparation, storage & display	2	Х	0		х	
40	M	ουτ			Personal cleanliness	1	0.5	0			
41	×	ουτ			Wiping cloths: properly used & stored	1	0.5	0			
42	IN	ουτ	NXA.		Washing fruits & vegetables	1	0.5	0			
Р	op	er U	se o	f Ute	ensils .2653, .2654						
43	M	оит			In-use utensils: properly stored	1	0.5	0			
44	M	оит			Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0			
45	M	оυт			Single-use & single-service articles: properly stored & used	1	0.5	0			
46	M	оυт			Gloves used properly	1	0.5	0		Π	
U	tens	sils a	and	Equi	ipment .2653, .2654, .2663			-			
47	IN	X			Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	x			
48	M	оит			Warewashing facilities: installed, maintained & used; test strips	1	0.5	0			
49	M	оυт			Non-food contact surfaces clean	1	0.5	0			
P	nys	ical	Faci	ilitie	s .2654, .2655, .2656						
50	M	оυт	N/A		Hot & cold water available; adequate pressure	1	0.5	0			
51	X	оυт			Plumbing installed; proper backflow devices	2	1	0			
52	M	ουτ			Sewage & wastewater properly disposed	2	1	0			
53	×	оит	N/A		Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0			
54	IN	¢ <b>X</b> ⊺			Garbage & refuse properly disposed; facilities maintained	1	0.5	x			
55	IN	0)∢т			Physical facilities installed, maintained & clean	1	0X5	0		Х	
~~	-				Meets ventilation & lighting requirements;						
56	M	оυт			designated areas used	1	0.5	0			



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NCRH orth Carolina while Health

# Comment Addendum to Food Establishment Inspection Report

Establishment Name: SPEEDWAY 8202		Establishment ID: 3034020660	
Location Address: <u>4301 STYERS FERRY F</u> City: <u>WINSTON SALEM</u> County: 34 Forsyth	ROAD State: <u>NC</u> Zip: 27104	X Inspection Re-Inspection Educational Visit Comment Addendum Attached? X	Date: <u>06/09/2025</u> Status Code: <u>A</u> Category #: II
Wastewater System: X Municipal/Community  Or Water Supply: X Municipal/Community Or Permittee: SPEEDWAY, LLC	n-Site System	Email 1:coop46994@7-11.com	
Telephone: <u>(336)</u> 945-0507		Email 3:ashley.hoover@7-11.com	

		Temperature Ol	oservations		
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Chicken Taquitos/Upright Cooler	41				
Hardboiled Eggs/Upright Cooler	41				
Upright Cooler/Ambient Air	33.8				
Snack Cooler/Ambient Air	35.6				
Hot Water/3 Compartment	125				
Quat Sanitizer/3 Compartment	300 ppm				
	First	Last			
Person in Charge (Print & Sign): A	Andre	Taylor			
	First	Last	-	Call Thiants	
Regulatory Authority (Print & Sign): J	lohnesha	Williams		Julius	
REHS ID:3406 - Williams, Johnesha	a	Verification Dates: Priority:	-	Priority Foundation:	Core:
REHS Contact Phone Number: (336) 7	703-3128		Authorize fina be received vi		
North Carolina Department of He		Services	nity employer.		Protection Program

#### Establishment Name: SPEEDWAY 8202

#### Establishment ID: 3034020660

Date: 06/09/2025 Time In: 1:20 PM Time Out: 2:30 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) PIC CFPM certification is expired. (A) 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. \*PIC stated that exam will be taken this week\*
- 5 2-501.11 Clean-up of Vomiting and Diarrheal Event (Pf) REPEAT: Vomit and diarrhea clean up procedure not available in food establishment. A food establishment shall have written procedures for employees to follow when responding to vomiting or diarrheal 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: RESHI provided printed copy to PIC.
- 39 3-305.11 Food Storage Preventing Contamination from the Premises (C) REPEAT: Crate of prepacked foods in walk in freezer on floor and in dry storage area. Food shall be protected from contamination by storing the food: (3) At least 15 cm (6 inches) above the floor.
- 47 4-501.11 Good Repair and Proper Adjustment Equipment (C) Water present at the bottom of upright cooler. (A) Equipment shall be maintained in good repair. \*PIC will place work order\*
- 54 5-501.115 Maintaining Refuse Areas and Enclosures (C) Minor cleaning to left side of cardboard dumpster. A storage area and enclosure for refuse, recyclables, or returnables shall be maintained free of unnecessary items, as specified under § 6-501.114, and clean.
- 55 6-501.12 Cleaning, Frequency and Restrictions (C) REPEAT: Wall and ceiling cleaning throughout dry storage area. Dusty vent in women's restroom. (A) Physical facilities shall be cleaned as often as necessary to keep them clean.

6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) - REPEAT: Small hole in wall between toilet at hand sink in women's restroom. Physical facilities shall be maintained in good repair.