

Food Establishment Inspection Report

Score: 98

Establishment Name: WEST TOWN RESTAURANT

Establishment ID: 3034010771

Location Address: 4371 STYERS FERRY RD

City: WINSTON SALEM State: North Carolina

Zip: 27104 County: 34 Forsyth

Permittee: GABE & LIZ LLC

Telephone: (336) 624-6845

☒ Inspection ☐ Re-Inspection ☐ Educational Visit

Wastewater System:

☒ Municipal/Community ☐ On-Site System

Water Supply:

☒ Municipal/Community ☐ On-Site Supply

Date: 05/13/2024

Status Code: A

Time In: 10:45 AM

Time Out: 1:30 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 2

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"/> 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"/> 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 OUT	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 OUT	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 OUT	Food-contact surfaces: cleaned & sanitized	3	1.5	X
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"/> OUT/N/A/N/O	Proper cooking time & temperatures	3	1.5	0
19	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper reheating procedures for hot holding	3	1.5	0
20	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cooling time & temperatures	3	1.5	0
21	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Proper hot holding temperatures	3	X	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"/> IN OUT	Time as a Public Health Control; procedures & records	3	1.5	0
Consumer Advisory .2653					
25	<input checked="" type="checkbox"/> OUT/N/A	Consumer advisory provided for raw/undercooked foods	1	0.5	0
Highly Susceptible Populations .2653					
26	<input checked="" type="checkbox"/> IN OUT	Pasteurized foods used; prohibited foods not offered	3	1.5	0
Chemical .2653, .2657					
27	<input checked="" type="checkbox"/> OUT/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 OUT	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 OUT	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 OUT	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 OUT	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> IN OUT	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"/> IN OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	X
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"/> OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	0
48	<input checked="" type="checkbox"/> OUT	Warewashing facilities: installed, maintained & used; test strips	1	0.5	0
49	<input checked="" type="checkbox"/> OUT	Non-food contact surfaces clean	1	0.5	0
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"/> 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/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 OUT	Physical facilities installed, maintained & clean	1	X	0
56	<input checked="" type="checkbox"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0
TOTAL DEDUCTIONS:					2



Comment Addendum to Food Establishment Inspection Report

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Wastewater System: ☒ Municipal/Community ☐ On-Site System
Water Supply: ☒ Municipal/Community ☐ On-Site System
Permittee: GABE & LIZ LLC
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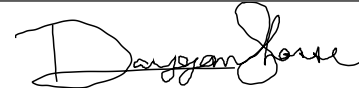
Establishment ID: 3034010771
☒ Inspection ☐ Re-Inspection Date: 05/13/2024
☐ Educational Visit Status Code: A
Comment Addendum Attached? ☒ Category #: IV
Email 1: gabe@westtownrestaurant.com
Email 2:
Email 3:

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
mushrooms/hot hold well	180	turkey/reach in cooler	32	quat sanitizer/3 compartment sink	200 ppm
meat sauce/hot hold well	147	chicken & dumpling/hot holding display	195	hot water/3 compartment sink	145
marinara/hot hold well	197	hamburger/hot holding display	147	hot water/dishmachine	171.8
gravy/hot hold well	172	barbeque/hot holding display	165		
mashed potato/reheat at 11:06	82	cooked onion/hot holding display	172		
mashed potato/reheat at 12:01	158	rice/hot holding display	182		
baked beans/reheat at 11:06	72	mashed potato/hot holding display	162		
baked beans/reheat at 12:01	162	fried squash/hot holding display	125		
cheese/cold hold well	40	fried squash (adjusted)/hot holding display	175		
raw catfish/raw reach in cooler	34	shrimp/final cook	170		
raw shrimp/raw reach in cooler	32	steak/final cook	172		
lettuce/cold holding station	41	pasta/walk in cooler	36		
tomato/cold holding station	36	cooked onion/walk in cooler	35		
coleslaw/cold holding station	40	prime rib/walk in cooler	38		
turkey/ ham mix/cold holding station	41	tilapia/walk in cooler	37		
tuna/cold holding bottom	31	hashbrown/walk in freezer	35		
hot dog/cold holding bottom	39	pot pie/cooling at 11:33	56		
tilapia/cold holding bottom	36	pot pie/cooling at 11:59	44		
fettuccine/reach in cooler	33	mac & cheese/cooling at 11:33	54		
spaghetti noodle/reach in cooler	35	mac & cheese/cooling at 11:59	46		

First
Person in Charge (Print & Sign): Gabriel
First
Regulatory Authority (Print & Sign): Daygan

Last
Obando
Last
Shouse



REHS ID: 3316 - Shouse, Daygan Verification Dates: Priority:

Priority Foundation: Core:

REHS Contact Phone Number: (336) 704-3141

Authorize final report to
be received via Email: _____



North Carolina Department of Health & Human Services

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Division of Public Health • Environmental Health Section
DHHS is an equal opportunity employer.
Food Establishment Inspection Report, 12/2023

Food Protection Program



Comment Addendum to Inspection Report

Establishment Name: WEST TOWN RESTAURANT

Establishment ID: 3034010771

Date: 05/13/2024 **Time In:** 10:45 AM **Time Out:** 1:30 PM

Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Gabriel Obando		Food Service	11/09/2022	11/09/2027

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.

- 16 4-602.11 Equipment Food-Contact Surfaces and Utensils - Frequency (C) Ice machine with soil buildup on interior sides of machine and on shield. In equipment such as ice bins and beverage dispensing nozzles and enclosed components of equipment such as ice makers, cooking oil storage tanks and distribution lines, beverage and syrup dispensing lines or tubes, coffee bean grinders, and water vending equipment at a frequency necessary to preclude the accumulation of soil or mold.
- 21 3-501.16 (A) (1) Time / Temperature Control for Safety Food, Hot and Cold Holding (P) Fried squash at front service line was 124 F. Time/temperature control for safety food shall be maintained at 135F or above. CDI: Fried squash refried to 175 F before being placed back on hot holding line.
- 44 4-901.11 Equipment and Utensils, Air-Drying Required (C) Some stacks of metal pans stored as clean were stacked while still wet. Allow clean utensils to adequately air dry before stacking. After cleaning and sanitizing, equipment and utensils shall be air dried or used after adequate draining before contact with food.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) Broken floor tiles in front of dish machine and tile next to walk in cooler needs to be repatched. Physical facilities shall be maintained in good repair. REPEAT.

Additional Comments

Front glass display cooler and reach in glass cooler with ambient temperatures of 43 F. Person in charge called maintenance to assess coolers and readjust temperatures to 35-38 F.