F	OC	d	Ε	SI	tablishment Inspection	R	e	00	rt							9	Score:	9	<u>5.5</u>	<u>5</u>	
Establishment Name: QUALITY MART #39 Establishment ID: 3034011274																					
Location Address: 3130 PETERS CREEK PARKWAY SInspection Re-Inspection																					
City: WINSTON SALEM State: NC													D	ate		7 / 1 2 / 2 Ø 1 7 Status Code: A	ı				
Zip: 27103 County: 34 Forsyth																n: <u>∅ </u>		an	n n		
•	· · · · · · · · · · · · · · · · · · ·															ime: 1 hr 45 minutes	0	ρ	•		
remittee.													C	ate	go	ory #: II					
	Telephone: (336) 784-8134												FI	Δ	F	stablishment Type: Fast Food Restauran	t	_			
W	ast	ew	ate	er S	System: Municipal/Community [_ Oı	n-S	Site	S	ys	ter	n				Risk Factor/Intervention Violations					_
W	Water Supply: ⊠Municipal/Community ☐ On-Site Supply															Repeat Risk Factor/Intervention Vi		_ s:	1		
	-00	dha	rn	- III	noon Dick England and Dublic Hoolth Int	onio	nti	000								Good Potail Prostings		=	_	_	_
	Foodborne Illness Risk Factors and Public Health Interventions Risk factors: Contributing factors that increase the chance of developing foodborne illness.										Good Retail Practices Good Retail Practices: Preventative measures to control the addition of pathogens, chem									3,	
F				_	ventions: Control measures to prevent foodborne illness o	1										and physical objects into foods.		_	_	_	_
-		OUT		N/O	Compliance Status .2652	OU ⁻	Γ	CDI	R	VR	-	\perp		N/A			OUT		CDI F	R V	/R
1	upe				PIC Present; Demonstration-Certification by	×	0	П	X	\exists	28		000	a an	a vv	/ater .2653, .2655, .2658 Pasteurized eggs used where required	1 0.5	0 [7	_
Ė	mpl			alth	accredited program and perform duties .2652						_	×				Water and ice from approved source	21	4	<u> </u>	#	_
-	×				Management, employees knowledge; responsibilities & reporting	3 1.5	0							5.7		Variance obtained for specialized processing			<u> </u>	#	=
Н	X				Proper use of reporting, restriction & exclusion	3 1.5	0	П			30			×	-4	methods	1 0.5	0 [끄	ᅶ	_
\vdash		Нус	jien	ic Pı	ractices .2652, .2653) 	ren	nper	atu	re Control .2653, .2654 Proper cooling methods used; adequate	1 0.5	0		7	_
4	1⊠				Proper eating, tasting, drinking, or tobacco use	2 1	0						<u> </u>	52		equipment for temperature control		-	1	#	_
5	X				No discharge from eyes, nose or mouth	1 0.5	0				32			×		Plant food properly cooked for hot holding		+		+	_
P	reve	ntin	g Co	onta	mination by Hands .2652, .2653, .2655, .2656						33			X		Approved thawing methods used		-		+	_
6	X				Hands clean & properly washed	4 2	0				34	\Box	X			Thermometers provided & accurate	1 🔀	0[<u> </u>	X
7	X				No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1.5	0					ood	Ider	ntific	atio					- - -	
8	X				Handwashing sinks supplied & accessible	21	0					ш	ntic	n of	Fo	Food properly labeled: original container od Contamination .2652, .2653, .2654, .2656, .	2657	الا			_
Α	ppro	ovec	l So	urce	.2653, .2655							×		11 01	10	Insects & rodents not present; no unauthorized		0		7	
9	X				Food obtained from approved source	2 1	0					×	_			animals Contamination prevented during food	21	=	-	7	_
10				X	Food received at proper temperature	21	0						<u> </u>			preparation, storage & display	-++	-	_	-	_
11	X				Food in good condition, safe & unadulterated	2 1	0				_	X	<u>⊔</u>			Personal cleanliness	1 0.5	-	+	+	_
12			X		Required records available: shellstock tags, parasite destruction	21	0					×				Wiping cloths: properly used & stored	-++	-		4	_
_					ontamination .2653, .2654						40	Ш		×	. 1 17	Washing fruits & vegetables	1 0.5	0 [<u> </u>	ᅶ	_
13			X		Food separated & protected	3 1.5	0					rope		se oi	TUt	ensils .2653, .2654 In-use utensils: properly stored	1 0.5	0 [7	_
14	X				Food-contact surfaces: cleaned & sanitized	3 1.5	0									Utensils, equipment & linens: properly stored,		7	#	#	=
15	X				Proper disposition of returned, previously served, reconditioned, & unsafe food	21	0					×				dried & handled Single-use & single-service articles: properly		_		4	_
P	oter	ntiall	_	azar	dous Food Time/Temperature .2653						43		X			stored & used		0][4	_
16			X		Proper cooking time & temperatures	3 1.5	0				44	X				Gloves used properly	1 0.5	0		<u> </u>	=
17				×	Proper reheating procedures for hot holding	3 1.5	0				U	tens	ils a	and I	Equ	ipment .2653, .2654, .2663 Equipment, food & non-food contact surfaces		4	7	7	
18				X	Proper cooling time & temperatures	3 1.5	0				45	X				approved, cleanable, properly designed, constructed. & used	21	0		ᄓ	
19	X				Proper hot holding temperatures	3 1.5	0				46	X				Warewashing facilities: installed, maintained, & used: test strips	1 0.5	0 [1	1	_
20	X				Proper cold holding temperatures	3 1.5	0				_	X	П			Non-food contact surfaces clean	1 0.5	0 [7	╁	_
21		X			Proper date marking & disposition	3 🔀	0	X		\exists		\Box	_	Faci	litie	es .2654, .2655, .2656					
22	$\overline{\Box}$	$\overline{\Box}$	\mathbf{X}	П	Time as a public health control: procedures &	2 1	0		7	=	48	X/				Hot & cold water available; adequate pressure	21	0		7	5
ш	ons	ume		dviso	records				<u> </u>		49	X				Plumbing installed; proper backflow devices	21	0		1	Ī
23			X		Consumer advisory provided for raw or undercooked foods	1 0.5	0			\exists	50	×				Sewage & waste water properly disposed	21	0 [1	_
Н	lighl	y Su	sce	ptib	le Populations .2653						-					Toilet facilities: properly constructed, supplied		0	7	#	<u> </u>
24			×		Pasteurized foods used; prohibited foods not offered	3 1.5	0				52			H		& cleaned Garbage & refuse properly disposed; facilities		#	#	#	_
$\overline{}$	hem				.2653, .2657							X	<u> </u>			maintained		0	<u> </u>	<u> </u>	_
25	Ш	Щ	X		Food additives: approved & properly used	1 0.5	0					×				Physical facilities installed, maintained & clean		0			_
26	X				Toxic substances properly identified stored, & used	21	0				54	X				Meets ventilation & lighting requirements; designated areas used	1 0.5	0			_



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Conformance with Approved Procedures .2653, .2654, .2658

Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan



Total Deductions:

Comment Addendum to Food Establishment Inspection Report Establishment Name: QUALITY MART #39 Establishment ID: 3034011274 Location Address: 3130 PETERS CREEK PARKWAY Date: 07/12/2017 City: WINSTON SALEM State: NC Comment Addendum Attached? Status Code: A Zip: 27103 County: 34 Forsyth Category #: II Wastewater System:

■ Municipal/Community

On-Site System Email 1: qm0039@qocnc.com Water Supply: Municipal/Community □ On-Site System Permittee: QUALITY OIL COMPANY LLC Email 2: Telephone: (336) 784-8134 Email 3: Temperature Observations Location Item Location Temp Item Temp Item Location Temp hot water utensil sink 135 hot dog hot holding 145 hot holding 147 sausage dog chili 170 hot holding slaw cold holding 38 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. 2-102.12 Certified Food Protection Manager - C-There is no certified food protection manager present today. A certified food protection manager shall be present during all hours of spell foodservice operation. 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking - PF-21 Hot dogs, sausage dogs and chili in the cooler with no date markings. Refrigerated, RTE, PHF shall be marked with date opened. These foods may be held for 7 days if held at 41F or less. CDI- all foods were properly date marked 4-302.12 Food Temperature Measuring Devices - PF-The only food thermometer available is a dial stem that measures from 50F to 550F. This would be sufficient for measuring hot foods but not for cold foods since cold foods are held 45F or less. A thermometer to measure food temperatures shall be available and used. VR-Verification required 7/21/17. **First** Last D'Lynn Tate Person in Charge (Print & Sign):

First Last
Regulatory Authority (Print & Sign):

Angie

Pinyan

REHS ID: 1690 - Pinyan, Angie

Verification Required Date: Ø 7 / 21 / 2017

REHS Contact Phone Number: (336)703-2618





Establishment Name: QUALITY MART #39 Establishment ID: 3034011274

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.



43 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C The single service cup dispenser for coffee cups is not approved. The lip of each cup is exposed to possible contamination (dust, splash, hands, sneezes, etc) along with the end cup nearest the wall. The 2 cup dispensers on each end of the drink station are missing the caps on the ends nearest the wall. Single service items shall be protected from splash, dust, hands, sneezes when on display for customer self service.





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