

Food Establishment Inspection Report

Score: 94

Establishment Name: DOMINOS #7423

Establishment ID: 3034012835

Location Address: 4655 YADKINVILLE RD

☒ Inspection ☐ Re-Inspection

City: PFAFFTOWN

State: NC

Date: 02 / 18 / 2020 Status Code: A

Zip: 27040

County: 34 Forsyth

Time In: 01 : 20 ^{am} _{pm} Time Out: 03 : 15 ^{am} _{pm}

Permittee: PIEDMONT PARTNERS LLC

Total Time: 1 hr 55 minutes

Telephone: (336) 922-7080

Category #: II

Wastewater System: ☒ Municipal/Community ☐ On-Site System

FDA Establishment Type: Fast Food Restaurant

Water Supply: ☒ Municipal/Community ☐ On-Site Supply

No. of Risk Factor/Intervention Violations: 3

No. of Repeat Risk Factor/Intervention Violations: 1

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.							
IN	OUT	N/A	N/O	Compliance Status	OUT	CDI	R VR
Supervision .2652							
1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Employee Health .2652							
2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices .2652, .2653							
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preventing Contamination by Hands .2652, .2653, .2655, .2656							
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Approved Source .2653, .2655							
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination .2653, .2654							
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potentially Hazardous Food Time/Temperature .2653							
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper hot holding temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory .2653							
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations .2653							
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical .2653, .2657							
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures .2653, .2654, .2658							
27	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Good Retail Practices							
Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.							
IN	OUT	N/A	N/O	Compliance Status	OUT	CDI	R VR
Safe Food and Water .2653, .2655, .2658							
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Variance obtained for specialized processing methods	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control .2653, .2654							
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification .2653							
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657							
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Washing fruits & vegetables	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils .2653, .2654							
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utensils and Equipment .2653, .2654, .2663							
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
46	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Physical Facilities .2654, .2655, .2656							
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Total Deductions:						6	



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Off



Comment Addendum to Food Establishment Inspection Report

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Location Address: 4655 YADKINVILLE RD

City: PFAFFTOWN State: NC

County: 34 Forsyth Zip: 27040

Wastewater System: ☒ Municipal/Community ☐ On-Site System

Water Supply: ☒ Municipal/Community ☐ On-Site System

Permittee: PIEDMONT PARTNERS LLC

Telephone: (336) 922-7080

Establishment ID: 3034012835

☒ Inspection ☐ Re-Inspection Date: 02/18/2020

Comment Addendum Attached? ☐ Status Code: A

Water sample taken? ☐ Yes ☒ No Category #: II

Email 1: shane@teampiedmontpizza.com

Email 2:

Email 3:

Temperature Observations

Cold Holding Temperature is now 41 Degrees or less

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
hot water	3 comp sink	147	wings	reach in cooler	38			
quat sani	ppm 3 comp sink	200	wings	walk in cooler	40			
mozzarella	make unit	45	mozzarella	walk in cooler	41			
pepperoni	make unit	45	pepperoni	walk in cooler	41			
steak	make unit	45	chicken	walk in cooler	40			
ham	make unit	45	pepsauspie	final cook	186			
all TCS food	make unit cooled 20	44	pasta	reach in cooler	41			
salami	reach in cooler	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- REPEAT- No employees currently working are certified food protection managers. At least one employee who has supervisory and management responsibility and the authority to direct and control food preparation and service shall be a certified food protection manager, who has shown proficiency of required information by passing an exam that is ANSI-accredited.
- 2-201.11 (A), (B), (C), & (E) Responsibility of Permit Holder, Person in Charge, and Conditional Employees - P- Manager on duty did not know where to locate employee health policy, or any of the five symptoms of exclusion or five reportable foodborne illnesses. The permit holder shall require food employees to report to the person in charge information about their health and activities as they relate to diseases that are transmissible through food. CDI- Copy of employee health policy left with establishment and education provided by REHSI.
- 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P- Mozzarella, pepperoni, ham, sausage, beef, steak all measured 45F in top of make unit. TCS foods shall be maintained at 41F or below. CDI- Manager adjusted thermostat and all foods were cooled a degree within 20 minutes. 0 pts.

Lock
Text



Person in Charge (Print & Sign): Summer First White Last

Regulatory Authority (Print & Sign): Lauren First Pleasants Last

Summer White
Lauren Pleasants

REHS ID: 2809 - Pleasants, Lauren

Verification Required Date: 02 / 28 / 2020

REHS Contact Phone Number: (336) 703-3144



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- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C- REPEAT with improvement- Walk-in cooler door has panel inside with bolts going through the door. Insulation is no longer exposed, but surfaces of the door are not smooth and easily cleanable, nor in good repair. Replace torn gasket on walk-in cooler door. Refinish or replace rusted shelf on left side of walk-in cooler. Equipment shall be maintained in good repair.
- 46 4-501.14 Warewashing Equipment, Cleaning Frequency - C- Backsplash of 3 compartment sink visibly soiled. Warewashing equipment shall be cleaned before use, throughout the day as necessary to maintain function of equipment and avoid recontamination of utensils and equipment, and at least every 24 hours. // 4-302.14 Sanitizing Solutions, Testing Devices - PF- No test strips available for chemical sanitizer. A test kit or other device that accurately measures the concentration of mg/l of sanitizing solutions shall be provided. VERIFICATION of test strips required by 2/28/2020. Contact Lauren Pleasants at (336)703-3144 or pleasaml@forsyth.cc when test strips are obtained.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C- Cleaning needed on canned goods shelving and lower shelves of prep tables. Nonfood-contact surfaces shall be free of dust, dirt, food residue, and other debris. 0 pts.
- 51 6-501.18 Cleaning of Plumbing Fixtures - C- Cleaning needed on all handwashing sinks, including faucets, basins, and ledges. Plumbing fixtures shall be maintained clean. 0 pts.
- 53 6-201.13 Floor and Wall Junctures, Coved, and Enclosed or Sealed - C- REPEAT- No coved base in restroom. Floor and wall junctures shall be coved and sealed to no less than 1mm. // 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C- Fill any holes in wall from attachments with caulk to make smooth. Replace broken tiles at can wash and replace broken basetiles at wall partition edge, then caulk tiles to the wall. Physical facilities shall be maintained in good repair. // 6-501.12 Cleaning, Frequency and Restrictions - C- Cleaning needed in floor drain under 3 compartment sink. Organization and floor cleaning needed in back bathroom. Physical facilities shall be maintained clean.



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✓
Spell



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Spell



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✓
Spell

