T (	<u>)(</u>	)U	E	<u>. St</u>	abiishment inspection	Rep	<u> </u>	l					SCI	ore:	<u> </u>	<u> 19</u>	<u>.၁</u>	_
Establishment Name: CAMPUS GAS							Establishment ID: 3034012581											
Location Address: 1231 POLO RD								Establishment ib										
City: WINSTON SALEM State: NC							Date: 0 2 / 1 9 / 2 0 2 0 Status Code: A											
,								Time In: $12:40\%$ pm Time Out: $02:30\%$ pm										
OAMBUO OAO ILIO									Total Time: 1 hr 50 minutes									
	emittee.								Category #: III									
	Telephone: (919) 943-9692								FDA Fetablishment Type, Full-Service Restaurant									
<b>Wastewater System:</b> ⊠Municipal/Community ☐ On-Site Sys							Syst	tem FDA Establishment Type: Full-Service Restaurant No. of Risk Factor/Intervention Violations: 2										
<b>Water Supply:</b> ⊠Municipal/Community ☐ On-Site Supply							/	No. of Repeat Risk Factor/Intervention Violations:										
Foodborne Illness Risk Factors and Public Health Interventions											Good Retail Practices							
Risk factors: Contributing factors that increase the chance of developing foodborne illne  Public Health Interventions: Control measures to prevent foodborne illness or injury.					orne illnes			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	T CDI R VR IN OUT N/A N/O Compliance Status					OU	T	CDI	I R	VR					
$\neg$		rvisi			.2652				Safe	Food		d W	/ater .2653, .2655, .2658					
					PIC Present; Demonstration-Certification by accredited program and perform duties	2 0			28 🗆		X		Pasteurized eggs used where required	1 0.	5 0			
		oye	e He	alth	.2652				29 🔀				Water and ice from approved source	2 1				
$\rightarrow$	X	Ц			Management, employees knowledge; responsibilities & reporting	3 1.5 0		Щſ	30 🗆		X		Variance obtained for specialized processing methods	1 0.	5 0			Б
_	X				Proper use of reporting, restriction & exclusion	3 1.5 0			Food	l Ten	nper	atu	re Control .2653, .2654					
$\overline{}$		Ну	gien	ic Pr	actices .2652, .2653				31 🔀				Proper cooling methods used; adequate equipment for temperature control	1 0.	50			
$\rightarrow$	X	Ц			Proper eating, tasting, drinking, or tobacco use	210	ШШ	Щi	32 🗆			×	Plant food properly cooked for hot holding	1 0.	50			T
5	×				No discharge from eyes, nose or mouth	1 0.5 0			33 🔀					1 0.	+	-	$\overline{\Box}$	Ħ
$\neg$		ntin	g Co	ontai	mination by Hands .2652, .2653, .2655, .2656				34 🔀	+			Thermometers provided & accurate	1 0.	+		H	F
$\dashv$	X				Hands clean & properly washed	420		Ш	Food		atific	catio	· ·				브	브
7	X				No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1.5 0			35 🔀	_	ши	Jani	Food properly labeled: original container	2 1	0	П	Т	П
8	X				Handwashing sinks supplied & accessible	210					n of	f Fo	od Contamination .2652, .2653, .2654, .2656, .2657					ľ
Α	ppr	ovec	d So	urce	.2653, .2655				36 🔀	$\overline{}$			Insects & rodents not present; no unauthorized	$\overline{}$	0	П	П	П
9	X				Food obtained from approved source	210		$  \Box  $	37 🔀	+			animals  Contamination prevented during food	2 1	-	-	F	E
10				×	Food received at proper temperature	210		11 114		+			preparation, storage & display	$\vdash$	+	-	븯	H
11	X				Food in good condition, safe & unadulterated	210		ILLIH	38 🗷	+			Personal cleanliness	1 0.	+	H	1-	₽
12			X		Required records available: shellstock tags, parasite destruction	210		11 111	39 🔀	+			Wiping cloths: properly used & stored	1 0.	0		$\Box$	$\mathbb{L}$
P	rote	ctio		om C	ontamination .2653, .2654				40 🔀				Washing fruits & vegetables	1 0.	50			
13	X				Food separated & protected	3 1.5 0				_	se o	f Ut	ensils .2653, .2654					
14		X			Food-contact surfaces: cleaned & sanitized	3 1.5	N O	Ы	41 🗵				In-use utensils: properly stored	1 0.	<u> </u>	Ш	Ш	L
$\rightarrow$	X	П			Proper disposition of returned, previously served,	210		H	42 🔀				Utensils, equipment & linens: properly stored, dried & handled	1 0.	5 0			
		ntial	ly Ha	azaro	reconditioned, & unsafe food dous Food Time/Temperature .2653				43 🔀				Single-use & single-service articles: properly stored & used	1 0.	50			
16				×	Proper cooking time & temperatures	3 1.5 0			44 🔀				Gloves used properly	1 0.	5 0			石
17				X	Proper reheating procedures for hot holding	3 1.5 0	ΠП	П	Uten	sils a	and	Equ	ipment .2653, .2654, .2663					
18				×	Proper cooling time & temperatures	3 1.5 0			45 🗷				Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2 1				
19	X				Proper hot holding temperatures	3 1.5 0			46 🔀				Warewashing facilities: installed, maintained, &	1 0.	50	П	П	П
20	×				Proper cold holding temperatures	3 1.5 0		ธ	47	+-			used; test strips  Non-food contact surfaces clean	1	+	_	Ħ	Ħ
21		$\overline{\mathbf{X}}$			Proper date marking & disposition	3 1.5 🗶		H	Phys		Faci	ilitie						
21					Time as a public health control: procedures &			H	48 🔀	$\overline{}$			Hot & cold water available; adequate pressure	2 1	0		П	Б
	X one	uma	r Ac	dvisc	records	210	ШΠ	ᄖ	49 🔀	+			Plumbing installed; proper backflow devices	2 1				F
23			X	IVISC	Consumer advisory provided for raw or	1 0.5 0			50 🔀	+					+-	-	H	E
Н	iahl	v Sı		ptibl	undercooked foods e Populations .2653	اعادات			_		_		Sewage & waste water properly disposed  Toilet facilities: properly constructed, supplied	2 1	+		븯	Ë
24			X		Pasteurized foods used; prohibited foods not offered	3 1.5 0			51 🔀	+-	Ш		& cleaned	1 0.	5 0	빋	빋	尸
С	hen	nical			.2653, .2657				52 🗆	×			Garbage & refuse properly disposed; facilities maintained	1 0.	5 🗶			P
25			X		Food additives: approved & properly used	1 0.5 0			53 🔀				Physical facilities installed, maintained & clean	1 0.	5 0			
26	X				Toxic substances properly identified stored, & used	210			54 🗷				Meets ventilation & lighting requirements; designated areas used	1 0.	50			
C	onf	orma	ance	with	Approved Procedures .2653, .2654, .2658							1		0.5				
27	$\Box$	$\Box$	×		Compliance with variance, specialized process,	2 1 0							Total Deductions:	0.5				



|27| 🗆 | 🗆 | 🔀

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



Fstahlishme	nt Name: CAMPUS		<u> Huum to</u>	FOOU E		ment ID: 3034012581	Report				
City: WINS	.ddress: 1231 POLO TON SALEM	TKD		ate: NC	☐ Inspection ☐ Re-Inspection ☐ Date: 02/19/2020  Comment Addendum Attached? ☐ Status Code: A						
County: 34			Sta _ Zip:_ <sup>27106</sup>	ale:		nduendum Attacheu? □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Status Code: A Category #:				
•	System: 🗷 Municipal/Co	ommunity 🗌 (	•		Email 1: ben@campusgas.com						
Water Supply			On-Site System								
	CAMPUS GAS, LLC				Email 2:						
Telephone	:_(919) 943-9692				Email 3:						
			Tempe	erature O	)bservatio	ns					
14				•	is now 4	1 Degrees or less		T			
Item pimento chz	Location prep cooler (top)	Temp 35	item hot water	Location 3 comp sir	nk	Temp Item 129	Location	Temp			
veg. burger	prep cooler (base)	40	final rinse	glass wasl	her	172					
chili	steam unit	158									
hot dog	п	163	ServSafe	Ben Ingolo	d 8/10/23	00					
egg salad	walk-in cooler	35				-					
strata	п	35									
			Observatio								
						as stated in sections 8-405.1 nitization-Temperature, p					
ammor labelin Cl sani	nium compound solu g.  CDI - owner draiı	ition shall ha ned sink, ca 00 ppm in th	ave a concent lled rep for ad ne 3rd compai	tration as ind djustment, a ertment of the	dicated by the nd decided to	es that strength should be ne manufacturer's use dir o switch to chlorine sanit er had Cl test strips to en	rections included in tizer until dispenser	the is adjusted			
gallon establis period	of milk, opened cart shment for >24 hour	on of half ar s must be d y of opening	nd half were n late marked. g) or the man	not dated. P When milk purfacturer's e	otentially hat products are	ntrol for Safety Food), Dazardous foods prepared/ opened, they must be u te, whichever is more lim	opened and held in sed within the appro	an oved time			
filters i		aning due to	grease accu	ımulation. N	Nonfood cont	under flat top grill, esp. a tact surfaces of equipme					
Lock Text											
Person in Cha	rge (Print & Sign):	Fi. Ben	rst	Ingold	Last	Ber- 1	3. Ival	-4			
Regulatory Au	thority (Print & Sign)		rst	Welch	Last	Lubriz W	B. Inol Eleh peris				
	REHS ID	2519 - W	/elch, Aubrie	<del>)</del>		Verification Required Da	ate: / /				
REHS C	ontact Phone Number	(336)	703-31	3 1							

North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program

DHHS is an equal opportunity employer.

Page 2 of \_\_\_\_\_ Food Establishment Inspection Report, 3/2013



Establishment Name: CAMPUS GAS Establishment ID: 3034012581

#### **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.



52 5-501.115 Maintaining Refuse Areas and Enclosures - C Accumulation of leaves present in dumpster enclosure, as well as an unused trash can. A storage area and enclosure for refuse, recyclables, or returnables shall be maintained free of unneccesary items, and clean.





Establishment Name: CAMPUS GAS Establishment ID: 3034012581

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.





Establishment Name: CAMPUS GAS Establishment ID: 3034012581

### **Observations and Corrective Actions**

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Establishment Name: CAMPUS GAS	Establishment ID: 3034012581
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### **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.



