

Food Establishment Inspection Report

Score: 96

Establishment Name: WEST TOWN EATERY EXPRESS

Establishment ID: 3034011084

Location Address: 5584 SHATTALON DRIVE

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 09 / 17 / 2014 **Status Code:** A

Zip: 27106

County: 34 Forsyth

Time In: 11 : 30 ^{am} _{pm} **Time Out:** 01 : 20 ^{am} _{pm}

Permittee: PETER STRATES, JOHN STRATES, APOSTOLAS TSONGAS

Total Time: 1 hr 50 minutes

Telephone: (336) 922-5343

Category #: IV

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

FDA Establishment Type:

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

No. of Risk Factor/Intervention Violations: 0

No. of Repeat Risk Factor/Intervention Violations:

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties				2	0		
Employee Health .2652											
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting				3	15	0	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion				3	15	0	
Good Hygienic Practices .2652, .2653											
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use				2	1	0	
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth				1	05	0	
Preventing Contamination by Hands .2652, .2653, .2655, .2656											
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed				4	2	0	
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				3	15	0	
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible				2	1	0	
Approved Source .2653, .2655											
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source				2	1	0	
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature				2	1	0	
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated				2	1	0	
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction				2	1	0	
Protection from Contamination .2653, .2654											
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected				3	15	0	
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized				3	15	0	
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food				2	1	0	
Potentially Hazardous Food Time/Temperature .2653											
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures				3	15	0	
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding				3	15	0	
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures				3	15	0	
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures				3	15	0	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures				3	15	0	
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition				3	15	0	
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records				2	1	0	
Consumer Advisory .2653											
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consumer advisory provided for raw or undercooked foods				1	05	0	
Highly Susceptible Populations .2653											
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered				3	15	0	
Chemical .2653, .2657											
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food additives: approved & properly used				1	05	0	
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used				2	1	0	
Conformance with Approved Procedures .2653, .2654, .2658											
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packing 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.												
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				1	05	0		
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source				2	1	0		
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods				1	05	0		
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				1	05	0		
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding				1	05	0		
33	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used				1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate				1	05	0		
Food Identification .2653												
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container				2	1	0		
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				2	1	0		
37	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display				2	<input checked="" type="checkbox"/>	0		
38	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness				1	<input checked="" type="checkbox"/>	0		
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored				1	05	0		
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables				1	05	0		
Proper Use of Utensils .2653, .2654												
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored				1	05	0		
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled				1	05	0		
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used				1	05	0		
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly				1	05	0		
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				2	<input checked="" type="checkbox"/>	0		
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips				1	05	0		
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean				1	<input checked="" type="checkbox"/>	0		
Physical Facilities .2654, .2655, .2656												
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure				2	1	0		
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices				2	1	0		
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed				2	1	0		
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned				1	05	0		
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained				1	05	0		
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean				1	<input checked="" type="checkbox"/>	0		
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used				1	05	0		
Total Deductions:										4		



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program
DHHS is an equal opportunity employer.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: WEST TOWN EATERY EXPRESS

Establishment ID: 3034011084

Location Address: 5584 SHATTALON DRIVE

City: WINSTON SALEM State: NC

County: 34 Forsyth Zip: 27106

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

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

Permittee: PETER STRATES, JOHN STRATES, APOSTOLAS

Telephone: (336) 922-5343

☒ Inspection ☐ Re-Inspection Date: 09/17/2014

Comment Addendum Attached? ☐ Status Code: A

Category #: IV

Email 1: pjscooper@triad.rr.com

Email 2:

Email 3: 0-ts

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Mashed	serving line	137	salisbury	serving line	163			
grilled chicken	serving line	159	Sanitizer quat	three comp	200			
Pasta salad	serving line	44	Hot plate	dish machine	170			
potato salad	serving line	45	Shrimp	reach in	40			
mac and	final cook	180	flounder	reach in	38			
pinto beans	final reheat	190	tilapia	reach in	38			
beef	walk in	40	tomato	make top	43			
tomato	walk in	39	lettuce	make top	45			

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.

- 33 3-501.13 Thawing - C Raw chicken was thawing in prep sink under running water. Water was 78F today. When thawing foods under running water, the water must be below 70F and the food must be completely submerged. CDI: Chicken was moved to clean bin and put in the walk in cooler to thaw. CDI. Check water before thawing foods.
- 37 3-305.11 Food Storage-Preventing Contamination from the Premises - C One bin of flour stored under a prep table did not have a lid, Items in make unit bottom did not have lids including chicken, patties, and tomatoes. Ensure that foods that are not being used are adequately covered to prevent contamination. Keep covers on food products that are not in use.
- 38 2-402.11 Effectiveness-Hair Restraints - C Some employees are not wearing hair restraints when working with food. Ensure that all employees that are working with food, including making drinks, are wearing appropriate hair restraints.

Person in Charge (Print & Sign): Peter First Strates Last

Regulatory Authority (Print & Sign): Joseph First Chrobak Last

REHS ID: 2450 - Chrobak, Joseph

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3164



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program
DHHS is an equal opportunity employer.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: WEST TOWN EATERY EXPRESS

Establishment ID: 3034011084

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.



- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C Wire shelving though the facility is rusting and pitting. Bottom shelves of two prep tables are showing heavy rust and pitting damage. Equipment shall be maintained in good repair. Replace damaged shelving.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C Detail cleaning needed on backs of grill and fry equipment where grease has accumulated. Shelving in make units have some food build up and needs to be cleaned. Non food contact surfaces shall be maintained clean. Clean noted items.
- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C Roof tile holding vent in mens restroom is badly cracked, Baseboard by toilet in mens restroom is peeling off the wall. Floors and ceiling shall be maintained in good repair. Repair noted items. // 6-501.12 Cleaning, Frequency and Restrictions - C detail cleaning needed around the mens toilet and on the pillar in the middle of the kitchen that equipment surrounds as grease is accumulating.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: WEST TOWN EATERY EXPRESS

Establishment ID: 3034011084

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.

✓
Spell



Comment Addendum to Food Establishment Inspection Report

Establishment Name: WEST TOWN EATERY EXPRESS

Establishment ID: 3034011084

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.

✓
Spell



Comment Addendum to Food Establishment Inspection Report

Establishment Name: WEST TOWN EATERY EXPRESS

Establishment ID: 3034011084

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.

✓
Spell

