

Food Establishment Inspection Report

Score: 95.5

Establishment Name: TK TRIPPS 10

Establishment ID: 3034010461

Location Address: 3286 SILAS CREEK PKWY.

☒ Inspection ☐ Re-Inspection

City: WINSTON-SALEM

State: NC

Date: 11 / 24 / 2015 Status Code: A

Zip: 27103

County: 34 Forsyth

Time In: 02 : 30 ^{am}_{pm} Time Out: 06 : 15 ^{am}_{pm}

Total Time: 3 hrs 45 minutes

Permittee: T.K.TRIPPS

Category #: IV

Telephone: (336) 659-0080

FDA Establishment Type: Full-Service Restaurant

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

No. of Risk Factor/Intervention Violations: 2

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

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 | <input type="checkbox"/> | <input type="checkbox"/> |
| Employee Health .2652 | | | | | | | | | | | |
| 2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Management, employees knowledge; responsibilities & reporting | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper use of reporting, restriction & exclusion | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| Good Hygienic Practices .2652, .2653 | | | | | | | | | | | |
| 4 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Proper eating, tasting, drinking, or tobacco use | | | | 2 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 5 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No discharge from eyes, nose or mouth | | | | 1 | 05 | 0 | <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 | | | | 4 | 2 | 0 | <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 | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 8 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Handwashing sinks supplied & accessible | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| Approved Source .2653, .2655 | | | | | | | | | | | |
| 9 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food obtained from approved source | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 10 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Food received at proper temperature | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 11 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food in good condition, safe & unadulterated | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 12 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Required records available: shellstock tags, parasite destruction | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| Protection from Contamination .2653, .2654 | | | | | | | | | | | |
| 13 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Food separated & protected | | | | 3 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 14 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food-contact surfaces: cleaned & sanitized | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 15 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper disposition of returned, previously served, reconditioned, & unsafe food | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| Potentially Hazardous Food Time/Temperature .2653 | | | | | | | | | | | |
| 16 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper cooking time & temperatures | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 17 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Proper reheating procedures for hot holding | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 18 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper cooling time & temperatures | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 19 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper hot holding temperatures | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 20 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper cold holding temperatures | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 21 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper date marking & disposition | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 22 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Time as a public health control: procedures & records | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 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 | <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 | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| Chemical .2653, .2657 | | | | | | | | | | | |
| 25 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food additives: approved & properly used | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 26 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Toxic substances properly identified stored, & used | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 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 | <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 | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 29 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Water and ice from approved source | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 30 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Variance obtained for specialized processing methods | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| Food Temperature Control .2653, .2654 | | | | | | | | | | | |
| 31 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Proper cooling methods used; adequate equipment for temperature control | | | | 1 | 05 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 32 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Plant food properly cooked for hot holding | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 33 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Approved thawing methods used | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 34 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Thermometers provided & accurate | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| Food Identification .2653 | | | | | | | | | | | |
| 35 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Food properly labeled: original container | | | | 2 | 1 | <input checked="" 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 | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 37 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Contamination prevented during food preparation, storage & display | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 38 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Personal cleanliness | | | | 1 | 05 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 39 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Wiping cloths: properly used & stored | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 40 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Washing fruits & vegetables | | | | 1 | 05 | 0 | <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 | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 42 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Utensils, equipment & linens: properly stored, dried & handled | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 43 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Single-use & single-service articles: properly stored & used | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 44 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Gloves used properly | | | | 1 | 05 | 0 | <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 | | | | 2 | <input checked="" type="checkbox"/> | 0 | <input type="checkbox"/> |
| 46 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Warewashing facilities: installed, maintained, & used; test strips | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 47 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Non-food contact surfaces clean | | | | 1 | 05 | 0 | <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 | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 49 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Plumbing installed; proper backflow devices | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 50 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sewage & waste water properly disposed | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 51 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Toilet facilities: properly constructed, supplied & cleaned | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 52 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Garbage & refuse properly disposed; facilities maintained | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 53 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Physical facilities installed, maintained & clean | | | | 1 | <input checked="" type="checkbox"/> | 0 | <input type="checkbox"/> |
| 54 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Meets ventilation & lighting requirements; designated areas used | | | | 1 | <input checked="" type="checkbox"/> | 0 | <input type="checkbox"/> |
| Total Deductions: | | | | | | | | | | 4.5 | |

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Off

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Location Address: 3286 SILAS CREEK PKWY.

☒ Inspection ☐ Re-Inspection Date: 11/24/2015

City: WINSTON-SALEM State: NC

Comment Addendum Attached? ☐ Status Code: A

County: 34 Forsyth Zip: 27103

Category #: IV

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

Email 1: taylorle@aol.com

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

Email 2:

Permittee: T.K. TRIPPS

Email 3:

Telephone: (336) 659-0080

Temperature Observations

| Item | Location | Temp | Item | Location | Temp | Item | Location | Temp |
|-----------|-----------|---------|------|----------|------|------|----------|------|
| Serv Safe | Taylor Le | 7/23/18 | 0 | | | | | |
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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.

- 4 2-401.11 Eating, Drinking, or Using Tobacco - C - Employee on cook line chewing gum. Uncovered employee beverage stored on shelf. Employees shall eat/drink only in designated areas. Food employees may drink from a closed beverage container (cup with lid and straw) if the container is handled to prevent contamination of employee hands, the container, exposed food, clean equipment, utensils, linens, and unwrapped single service articles. CDI - Employee voluntarily disposed of gum. Employee voluntarily discarded beverage.
- 13 3-302.11 Packaged and Unpackaged Food-Separation, Packaging, and Segregation - P - Raw steaks stored above shrimp and salmon in upright cooler on cook line. Store food in accordance to final required cook temperatures. CDI - PIC placed shrimp and salmon in adjacent reach in cooler. / During floor cleaning, splash from hose observed spraying on seasoned whole potatoes for baking. Food must be protected from contamination. Relocate potatoes to a different area during detail floor cleaning. CDI - All potatoes rewashed.
- 31 3-501.15 Cooling Methods - PF - 0 points - Cooling Italian chicken and Cajun chicken individually wrapped and stacked in thick portions. Food shall be cooled by placing food in shallow pans, separating food into smaller or thinner portions (no more than 4 inches thick), and loosely covering food to facilitate heat transfer. Refer to 3-501.15 for more methods of compliance. CDI - Bags opened and placed on sheet pan to cool.

Person in Charge (Print & Sign): Taylor First Last Le

Regulatory Authority (Print & Sign): Carla First Last Day

REHS ID: 2405 - Day, Carla

Taylor Le
Carla Day REHS
Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3144



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- 35 3-302.12 Food Storage Containers Identified with Common Name of Food - C - 0 points - Bottles and containers storing spices and food ingredients throughout establishment are unlabeled. Working containers holding food or food ingredients removed from original packages (ex: cooking oil, flour, herbs, salt, spices, etc.) shall be identified with the common name of the food.
- 38 2-303.11 Prohibition-Jewelry - C - 0 points - Three employees wearing watches observed preparing food. While working with food, only a plain ring may be worn.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C - Equipment repair/replacement necessary on: chipped shelves in walk in cooler, wearing/corroding shelves along prep line and dry storage, cracked and broken food storage containers and lids, loose handle on reach in freezer next to fryer, condensation leak along door of walk in freezer, condensation leak in reach in cooler across from fryers and cracked lettuce spinner. / 4-205.10 Food Equipment, Certification and Classification - C - Remove Black & Decker food processor which is for household use only and replace with equipment approved for commercial use.
- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C - Grout on floor near dishwash and prep line is wearing. Repair./ Baseboard underneath dish machine is broken. Replace. / Floor tiles near back door are cracked. Replace.
- 54 6-202.11 Light Bulbs, Protective Shielding - C - Lightbulbs in heat lamps on expo lamp are not shatter resistant. Light bulbs shall be shielded, coated, or shatter resistant in areas where there is exposed food, clean equipment, utensils. Replace. / 6-303.11 Intensity-Lighting - C - Lighting low along beverage line. Recommend replacing lightbulbs in fixtures above. Lighting measures 6-8 foot candles along bar. Lighting in women's restroom measured 8-10 foot candles. Lighting underneath hood on cook line measured 30-35 foot candles. Increase lighting to a minimum of 20 foot candles at handwashing sinks, warewashing sinks, equipment/utensils storage, and in toilet rooms. Increase lighting to a minimum of 50 foot candles at surfaces where food employee are working with food or working with utensils or equipment such as knives, slicers, or grinders.



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✓
Spell



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