

Food Establishment Inspection Report

Score: 97Establishment Name: ABLE'S FAMILY RESTAURANTEstablishment ID: 3034012359Location Address: 615 EAST MOUNTAIN STREET☒ Inspection ☐ Re-InspectionCity: KERNERSVILLEState: NCDate: 06 / 20 / 2017 Status Code: AZip: 27284County: 34 ForsythTime In: 03 : 05 ^{am}_{pm} Time Out: 04 : 35 ^{am}_{pm}Total Time: 1 hr 30 minutesPermittee: VELINO VEGACategory #: IVTelephone: (336) 996-4101FDA Establishment Type: Full-Service RestaurantWastewater System: ☒ Municipal/Community ☐ On-Site SystemNo. of Risk Factor/Intervention Violations: 3Water Supply: ☒ Municipal/Community ☐ On-Site SupplyNo. 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 | | | | <u>2</u> | <u>0</u> | <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 | | | | <u>3</u> | <u>15</u> | <u>0</u> | <input type="checkbox"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper use of reporting, restriction & exclusion | | | | <u>3</u> | <u>15</u> | <u>0</u> | <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 | | | | <u>2</u> | <u>1</u> | <u>0</u> | <input type="checkbox"/> |
| 5 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No discharge from eyes, nose or mouth | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| Preventing Contamination by Hands .2652, .2653, .2655, .2656 | | | | | | | | | | | |
| 6 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Hands clean & properly washed | | | | <u>4</u> | <u>2</u> | <input checked="" type="checkbox"/> | <input checked="" 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 | | | | <u>3</u> | <u>15</u> | <u>0</u> | <input type="checkbox"/> |
| 8 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Handwashing sinks supplied & accessible | | | | <u>2</u> | <input checked="" type="checkbox"/> | <u>0</u> | <input checked="" type="checkbox"/> |
| Approved Source .2653, .2655 | | | | | | | | | | | |
| 9 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food obtained from approved source | | | | <u>2</u> | <u>1</u> | <u>0</u> | <input type="checkbox"/> |
| 10 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Food received at proper temperature | | | | <u>2</u> | <u>1</u> | <u>0</u> | <input type="checkbox"/> |
| 11 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food in good condition, safe & unadulterated | | | | <u>2</u> | <u>1</u> | <u>0</u> | <input type="checkbox"/> |
| 12 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Required records available: shellstock tags, parasite destruction | | | | <u>2</u> | <u>1</u> | <u>0</u> | <input type="checkbox"/> |
| Protection from Contamination .2653, .2654 | | | | | | | | | | | |
| 13 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food separated & protected | | | | <u>3</u> | <u>15</u> | <u>0</u> | <input type="checkbox"/> |
| 14 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food-contact surfaces: cleaned & sanitized | | | | <u>3</u> | <u>15</u> | <u>0</u> | <input type="checkbox"/> |
| 15 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper disposition of returned, previously served, reconditioned, & unsafe food | | | | <u>2</u> | <u>1</u> | <u>0</u> | <input type="checkbox"/> |
| Potentially Hazardous Food Time/Temperature .2653 | | | | | | | | | | | |
| 16 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper cooking time & temperatures | | | | <u>3</u> | <u>15</u> | <u>0</u> | <input type="checkbox"/> |
| 17 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Proper reheating procedures for hot holding | | | | <u>3</u> | <u>15</u> | <u>0</u> | <input type="checkbox"/> |
| 18 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper cooling time & temperatures | | | | <u>3</u> | <u>15</u> | <u>0</u> | <input type="checkbox"/> |
| 19 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper hot holding temperatures | | | | <u>3</u> | <u>15</u> | <u>0</u> | <input type="checkbox"/> |
| 20 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper cold holding temperatures | | | | <u>3</u> | <u>15</u> | <u>0</u> | <input type="checkbox"/> |
| 21 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper date marking & disposition | | | | <u>3</u> | <u>15</u> | <u>0</u> | <input type="checkbox"/> |
| 22 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Time as a public health control: procedures & records | | | | <u>2</u> | <u>1</u> | <u>0</u> | <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 | | | | <u>1</u> | <u>05</u> | <u>0</u> | <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 | | | | <u>3</u> | <u>15</u> | <u>0</u> | <input type="checkbox"/> |
| Chemical .2653, .2657 | | | | | | | | | | | |
| 25 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Food additives: approved & properly used | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| 26 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Toxic substances properly identified stored, & used | | | | <u>2</u> | <input checked="" type="checkbox"/> | <u>0</u> | <input checked="" 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 | | | | <u>2</u> | <u>1</u> | <u>0</u> | <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 | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| 29 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Water and ice from approved source | | | | <u>2</u> | <u>1</u> | <u>0</u> | <input type="checkbox"/> |
| 30 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Variance obtained for specialized processing methods | | | | <u>1</u> | <u>05</u> | <u>0</u> | <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 | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| 32 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Plant food properly cooked for hot holding | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| 33 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Approved thawing methods used | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| 34 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Thermometers provided & accurate | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| Food Identification .2653 | | | | | | | | | | | |
| 35 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food properly labeled: original container | | | | <u>2</u> | <u>1</u> | <u>0</u> | <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 | | | | <u>2</u> | <u>1</u> | <u>0</u> | <input type="checkbox"/> |
| 37 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Contamination prevented during food preparation, storage & display | | | | <u>2</u> | <u>1</u> | <u>0</u> | <input type="checkbox"/> |
| 38 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Personal cleanliness | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| 39 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Wiping cloths: properly used & stored | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| 40 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Washing fruits & vegetables | | | | <u>1</u> | <u>05</u> | <u>0</u> | <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 | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| 42 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Utensils, equipment & linens: properly stored, dried & handled | | | | <u>1</u> | <u>05</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 43 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Single-use & single-service articles: properly stored & used | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| 44 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Gloves used properly | | | | <u>1</u> | <u>05</u> | <u>0</u> | <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 | | | | <u>2</u> | <input checked="" type="checkbox"/> | <u>0</u> | <input checked="" type="checkbox"/> |
| 46 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Warewashing facilities: installed, maintained, & used; test strips | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| 47 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Non-food contact surfaces clean | | | | <u>1</u> | <u>05</u> | <u>0</u> | <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 | | | | <u>2</u> | <u>1</u> | <u>0</u> | <input type="checkbox"/> |
| 49 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Plumbing installed; proper backflow devices | | | | <u>2</u> | <u>1</u> | <u>0</u> | <input type="checkbox"/> |
| 50 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sewage & waste water properly disposed | | | | <u>2</u> | <u>1</u> | <u>0</u> | <input type="checkbox"/> |
| 51 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Toilet facilities: properly constructed, supplied & cleaned | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| 52 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Garbage & refuse properly disposed; facilities maintained | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| 53 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Physical facilities installed, maintained & clean | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| 54 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Meets ventilation & lighting requirements; designated areas used | | | | <u>1</u> | <u>05</u> | <u>0</u> | <input type="checkbox"/> |
| Total Deductions: | | | | | | | | | | <u>3</u> | |

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Comment Addendum to Food Establishment Inspection Report

Establishment Name: ABLE'S FAMILY RESTAURANT

Establishment ID: 3034012359

Location Address: 615 EAST MOUNTAIN STREET

City: KERNERSVILLE State: NC

County: 34 Forsyth Zip: 27284

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

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

Permittee: VELINO VEGA

Telephone: (336) 996-4101

☒ Inspection ☐ Re-Inspection Date: 06/20/2017

Comment Addendum Attached? ☐ Status Code: A

Category #: IV

Email 1:

Email 2:

Email 3:

Temperature Observations

| Item | Location | Temp | Item | Location | Temp | Item | Location | Temp |
|-------------|-------------|------|-------------|----------------|------|----------|----------------|------|
| Velino Vega | 07/23/20 | 0 | Corn | Hot hold | 178 | Sausages | Walk-in cooler | 42 |
| Hot water | 3 comp sink | 140 | Pinto beans | Hot hold | 162 | Chicken | Walk-in cooler | 33 |
| Chlorine | Bucket | 50 | Chili | Hot hold | 172 | Air temp | Front cooler | 39 |
| Gravy | Cooling | 56 | Tomatoes | Make unit | 42 | | | |
| Grits | Cooling | 57 | Lettuce | Make unit | 40 | | | |
| Hamburger | Final | 196 | Cole slaw | Make unit | 33 | | | |
| Chicken | Final | 197 | Tomatoes | Walk-in cooler | 43 | | | |
| Green beans | Hot hold | 175 | Lettuce | Walk-in cooler | 41 | | | |

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.

- 6 2-301.14 When to Wash - P- 0 pts. One food employee washed hands, turned off water faucet and dispensed paper towels using bare hands. Food employees shall wash their hands after engaging in activities that contaminate the hands and shall use a barrier such as paper towels to turn off water faucet and dispense paper towels. CDI- Employee was asked to re-wash hands.
- 8 5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF- One employee observed dumping sanitizer bucket in handwashing sink. A HANDWASHING SINK may not be used for purposes other than handwashing. CDI- Employee instructed to dump sanitizer solution in three compartment sink and to only use handwashing sink for washing hands.
- 26 7-203.11 Poisonous or Toxic Material Containers-Container Prohibitions - P- Spray bottle previously used to store bleach water is now being used to store oil. A container previously used to store POISONOUS OR TOXIC MATERIALS may not be used to store, transport, or dispense FOOD. CDI- Bottle discarded.



Person in Charge (Print & Sign): Velino *First* Vega *Last*

Regulatory Authority (Print & Sign): Eva *First* Robert REHSI *Last*

Velino Vega
Eva Robert REHSI

REHS ID: 2551 - Robert, Eva

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3135



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- 42 4-901.11 Equipment and Utensils, Air-Drying Required - C- 0 pts. Pepsi cups near ice machine stacked wet. Utensils shall be air-dried.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C- REPEAT. Repair/replacement is needed on torn refrigeration gaskets on make unit. Equipment shall be maintained in good repair.



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Spell



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