

# Food Establishment Inspection Report

Score: 96

Establishment Name: PEANUT HOUSE

Establishment ID: 3034020117

Location Address: 3101 N. INDIANA AVE.

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 03 / 15 / 2018 Status Code: A

Zip: 27105

County: 34 Forsyth

Time In: 02 : 10 <sup>am</sup> <sub>pm</sub> Time Out: 03 : 20 <sup>am</sup> <sub>pm</sub>

Total Time: 1 hr 10 minutes

Permittee: TIM WATSON

Category #: II

Telephone: (336) 722-6425

FDA Establishment Type: Fast Food Restaurant

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

No. of Risk Factor/Intervention Violations: 1

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

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                       |
| <b>Supervision</b> .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 type="checkbox"/> | <input type="checkbox"/> |
| <b>Employee Health</b> .2652   |                                     |                                     |                                     |  |  |                                     |                          |                          |                          |
| 2  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Management, employees knowledge; responsibilities & reporting                                |  | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper use of reporting, restriction & exclusion   |  | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Good Hygienic Practices</b> .2652, .2653  |                                     |                                     |                                     |  |  |                                     |                          |                          |                          |
| 4  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper eating, tasting, drinking, or tobacco use   |  | <input type="checkbox"/>            | <input 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 type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Preventing Contamination by Hands</b> .2652, .2653, .2655, .2656                          |                                     |                                     |                                     |  |  |                                     |                          |                          |                          |
| 6  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Hands clean & properly washed  |  | <input type="checkbox"/>            | <input 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 type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Handwashing sinks supplied & accessible  |  | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Approved Source</b> .2653, .2655  |                                     |                                     |                                     |  |  |                                     |                          |                          |                          |
| 9  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Food obtained from approved source   |  | <input type="checkbox"/>            | <input 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 type="checkbox"/>            | <input 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 type="checkbox"/>            | <input 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 type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Protection from Contamination</b> .2653, .2654  |                                     |                                     |                                     |  |  |                                     |                          |                          |                          |
| 13   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Food separated & protected   |  | <input type="checkbox"/>            | <input 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 type="checkbox"/>            | <input 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 type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Potentially Hazardous Food Time/Temperature</b> .2653                                     |                                     |                                     |                                     |  |  |                                     |                          |                          |                          |
| 16   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Proper cooking time & temperatures   |  | <input type="checkbox"/>            | <input 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 type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Proper cooling time & temperatures   |  | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper hot holding temperatures  |  | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper cold holding temperatures   |  | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper date marking & disposition  |  | <input type="checkbox"/>            | <input 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 type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Consumer Advisory</b> .2653   |                                     |                                     |                                     |  |  |                                     |                          |                          |                          |
| 23   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Consumer advisory provided for raw or undercooked foods                                      |  | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Highly Susceptible Populations</b> .2653  |                                     |                                     |                                     |  |  |                                     |                          |                          |                          |
| 24   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Pasteurized foods used; prohibited foods not offered   |  | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Chemical</b> .2653, .2657   |                                     |                                     |                                     |  |  |                                     |                          |                          |                          |
| 25   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Food additives: approved & properly used   |  | <input type="checkbox"/>            | <input 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 type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Conformance with Approved Procedures</b> .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 |  | <input type="checkbox"/>            | <input 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                                  |
| <b>Safe Food and Water</b> .2653, .2655, .2658   |                                     |                                     |                                     |   |  |                                     |                                     |                          |                                     |
| 28   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Pasteurized eggs used where required  |  | <input type="checkbox"/>            | <input 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 type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 30   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Variance obtained for specialized processing methods  |  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| <b>Food Temperature Control</b> .2653, .2654   |                                     |                                     |                                     |   |  |                                     |                                     |                          |                                     |
| 31   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper cooling methods used; adequate equipment for temperature control                                 |  | <input type="checkbox"/>            | <input 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 type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 33   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Approved thawing methods used   |  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 34   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Thermometers provided & accurate  |  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| <b>Food Identification</b> .2653   |                                     |                                     |                                     |   |  |                                     |                                     |                          |                                     |
| 35   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Food properly labeled: original container   |  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| <b>Prevention of Food Contamination</b> .2652, .2653, .2654, .2656, .2657  |                                     |                                     |                                     |   |  |                                     |                                     |                          |                                     |
| 36   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Insects & rodents not present; no unauthorized animals  |  | <input type="checkbox"/>            | <input 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 type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 38   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Personal cleanliness  |  | <input type="checkbox"/>            | <input 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 type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 40   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Washing fruits & vegetables   |  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| <b>Proper Use of Utensils</b> .2653, .2654   |                                     |                                     |                                     |   |  |                                     |                                     |                          |                                     |
| 41   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | In-use utensils: properly stored  |  | <input type="checkbox"/>            | <input 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 type="checkbox"/>            | <input 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 type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 44   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Gloves used properly  |  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| <b>Utensils and Equipment</b> .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 type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 46   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Warewashing facilities: installed, maintained, & used; test strips                                      |  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 47   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Non-food contact surfaces clean   |  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| <b>Physical Facilities</b> .2654, .2655, .2656   |                                     |                                     |                                     |   |  |                                     |                                     |                          |                                     |
| 48   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Hot & cold water available; adequate pressure   |  | <input type="checkbox"/>            | <input 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 type="checkbox"/>            | <input 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 type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 51   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Toilet facilities: properly constructed, supplied & cleaned   |  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 52   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Garbage & refuse properly disposed; facilities maintained   |  | <input type="checkbox"/>            | <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 type="checkbox"/>            | <input 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 type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| <b>Total Deductions:</b>   |                                     |                                     |                                     |   |  | <b>4</b>                            |                                     |                          |                                     |



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CR  
Off



# Comment Addendum to Food Establishment Inspection Report

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Location Address: 3101 N. INDIANA AVE.

City: WINSTON SALEM State: NC

County: 34 Forsyth Zip: 27105

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

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

Permittee: TIM WATSON

Telephone: (336) 722-6425

Establishment ID: 3034020117

☒ Inspection ☐ Re-Inspection Date: 03/15/2018

Comment Addendum Attached? ☐ Status Code: A

Category #: II

Email 1: \_\_\_\_\_

Email 2: \_\_\_\_\_

Email 3: \_\_\_\_\_

## Temperature Observations

**Effective January 1, 2019 Cold Holding will change to 41 degrees**

| Item          | Location    | Temp | Item | Location | Temp | Item | Location | Temp |
|---------------|-------------|------|------|----------|------|------|----------|------|
| Hot water     | 3 comp sink | 138  |      |          |      |      |          |      |
| Chlorine sani | Bottle      | 50   |      |          |      |      |          |      |
| Hot dog       | Upright     | 41   |      |          |      |      |          |      |
| Slaw          | Upright     | 40   |      |          |      |      |          |      |
| Chili         | Upright     | 43   |      |          |      |      |          |      |
| Chili         | Hot hold    | 201  |      |          |      |      |          |      |
| Hot dog       | Hot hold    | 154  |      |          |      |      |          |      |

## 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.

- 1 2-102.11 Demonstration - C REPEAT: Person-in-charge during inspection, without Food Protection Manager certification. The person-in-charge shall demonstrate this knowledge by being a certified food protection manager who has shown proficiency of required information through passing a test that is part of an accredited program.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C REPEAT: Replace corroded handles of handwashing sink. / Replace/refinish rusted shelving at 3 compartment sink and inside upright cooler. / Gasket to upright cooler is torn. / Ensure all equipment is ANSI-accredited. Equipment shall be maintained cleanable and in good repair.
- 52 5-501.113 Covering Receptacles - C Two lids open to dumpster during inspection. Maintain doors and lids closed to prevent pest harborage.

Lock  
Text



Person in Charge (Print & Sign): *First* Marian *Last* Watson

Regulatory Authority (Print & Sign): *First* Christy *Last* Whitley

*[Signature: Tim Watson]*

*[Signature: Christy Whitley REHS]*

REHS ID: 2610 - Whitley Christy

Verification Required Date:     /     /    

REHS Contact Phone Number: ( 336 ) 703 - 3157



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- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C // 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C REPEAT: Floor tiles throughout are damaged, cracked, and need to be replaced. / Baseboards need to be replaced/resealed throughout. / Create cove base in rear storage room. / Finish is wearing on floors in rear storage room. / Replace stained and damaged ceiling tiles throughout. / Finish is wearing on wall at can wash. / Seal holes in wall in restroom. Physical facilities shall be maintained cleanable and in good repair.

✓  
Spell



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