<u> </u>	<u>)U</u>	u	E	<u> </u>	<u>ablishment inspection</u>	Re	UUI	[L						50	ore: _	<u>90</u> .	.o				
Establishment Name: SUBWAY - COLLEGE PLAZA									Establishment ID: 3034011655												
					ess: 2808 UNIVERSITY PKWY									☑Inspection ☐Re-Inspection							
City: WINSTON-SALEM Starting County: 34 Forsyth								tate: NC Date: Ø8 / 13 / 2019 Status Code: A													
,									Time In: $09:25 \overset{\otimes}{\bigcirc} $ am Time Out: $10:50 \overset{\otimes}{\bigcirc} $ am pm												
•				(GURU 1 INC									ime: 1 hr 25 minutes							
	Permittee: GURU 1 INC Felephone: (336) 722-1400										Category #: _II										
	elephone: (330) /22-1400 Vastewater System: ⊠Municipal/Community □ On-Site Syst											FDA Establishment Type: Fast Food Restaurant									
								•	ten	11	No	o. c	of F	Risk Factor/Intervention Violations: 🚣							
Water Supply: □ Municipal/Community □ On-Site Supply No. of Repeat Risk Factor/Intervention Violations: □																					
Foodborne Illness Risk Factors and Public Health Interventions Good Retail Practices																					
R	Risk factors: Contributing factors that increase the chance of developing foodborne illness.									Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.											
P		_	N/A		ventions: Control measures to prevent foodborne illness or		CDI F) VD	Н	INI I	ОПТ	N/A	N/O	,	OUT	CDI		VD.			
S	uper	_		N/O	Compliance Status .2652	OUT	CDI F	K VK	\vdash		_			Compliance Status Vater .2653, .2655, .2658	OUT	СЫ	R	VK			
$\overline{}$	$\overline{}$	$\overline{}$			PIC Present; Demonstration-Certification by accredited program and perform duties	2 0			28	$\overline{}$	$\overline{}$	X		Pasteurized eggs used where required	1 0.5 (
E	mplo	ye	e He	alth	.2652				29	X				Water and ice from approved source	210						
2	X				Management, employees knowledge; responsibilities & reporting	3 1.5 0			30			X		Variance obtained for specialized processing			П	П			
3	X				Proper use of reporting, restriction & exclusion	3 1.5 0				\perp			atur	methods .2653, .2654							
$\overline{}$	$\overline{}$	Ну	gien	ic Pr	actices .2652, .2653				31	$\overline{}$				Proper cooling methods used; adequate equipment for temperature control	1 0.5 (
\rightarrow	X				Proper eating, tasting, drinking, or tobacco use	210			32			×		Plant food properly cooked for hot holding	1 0.5 0						
_	×				No discharge from eyes, nose or mouth	1 0.5 0			33					Approved thawing methods used	1 0.5 0	+-	П	П			
$\overline{}$	$\overline{}$	ntin	g Co	onta	mination by Hands .2652, .2653, .2655, .2656				34	_	П			Thermometers provided & accurate				Ē			
-	X		_	_	Hands clean & properly washed No bare hand contact with RTE foods or pre-	420			\perp	ood l		tific	atio	·							
-	×	Ш		Ш	approved alternate procedure properly followed	3 1.5 0		ᆜᆜ	35					Food properly labeled: original container	210			П			
	×				Handwashing sinks supplied & accessible	2 1 0			Pr	eve	ntio	n of	Foo	od Contamination .2652, .2653, .2654, .2656, .265	7						
\neg	ppro	vec	So	urce					36	X				Insects & rodents not present; no unauthorized animals	210						
\dashv				.	Food obtained from approved source	210			37	X				Contamination prevented during food preparation, storage & display	210	<u> </u>					
\rightarrow	_				Food received at proper temperature	210			38	X				Personal cleanliness	1 0.5 0						
\dashv	X		_		Food in good condition, safe & unadulterated Required records available: shellstock tags,	210			39	X				Wiping cloths: properly used & stored	1 0.5 0						
12	<u>Ц</u>	<u> </u>	×	□	parasite destruction	210		╨	40	X				Washing fruits & vegetables	1 0.5 0						
13	$\overline{}$	CIIO	n irc		Contamination .2653, .2654 Food separated & protected	3 1.5 0					r Us	se of	Ute	ensils .2653, .2654							
\dashv	-	X			Food-contact surfaces; cleaned & sanitized				41	X				In-use utensils: properly stored	1 0.5 0			P			
14	-				Proper disposition of returned, previously served,				42	X				Utensils, equipment & linens: properly stored, dried & handled	1 0.5						
15 P		tiall	v H:	72r	reconditioned, & unsafe food dous Food Time/Temperature .2653	210			43	X				Single-use & single-service articles: properly stored & used	1 0.5 0						
16			X		Proper cooking time & temperatures	3 1.5 0	ПП		\vdash	×	П			Gloves used properly	1 0.5 0		П	П			
17	П	П		×	Proper reheating procedures for hot holding	3 1.5 0		10	\vdash		ils a	nd I	Equ	ipment .2653, .2654, .2663							
18	_ _			\boxtimes	Proper cooling time & temperatures	3 1.5 0			45	×				Equipment, food & non-food contact surfaces approved, cleanable, properly designed,	210						
\dashv	×				Proper hot holding temperatures	3 1.5 0			\vdash					constructed, & used Warewashing facilities: installed, maintained, &				E			
20	-	×				3 × 0	\vdash		46					used; test strips	1 0.5 0	╀		Ë			
20	-		=		Proper cold holding temperatures	-	\vdash		47	Nysio		-ooi	litio	Non-food contact surfaces clean S .2654, .2655, .2656	1 0.5 0		Ш	브			
\dashv	×				Proper date marking & disposition Time as a public health control: procedures &	3 1.5 0							iitie	Hot & cold water available; adequate pressure	210		П	П			
22		LI I	Χ.	Lice	records	210			49					Plumbing installed; proper backflow devices	210	#=		Ē			
23	UIISI	ıme	I AC	lviso	Consumer advisory provided for raw or	1 0.5 0			\vdash		_					+		H			
H	ighl	ر ا Su		ptib	le Populations .2653	المارية المارية	١٠١٢	-	50					Sewage & waste water properly disposed Toilet facilities: properly constructed, supplied	210	+		H			
24			X		Pasteurized foods used; prohibited foods not offered	3 1.5 0			\vdash	×	Ш	Ш		& cleaned Garbage & refuse properly disposed; facilities	1 0.5 0	\perp		닏			
С	hem	ical			.2653, .2657				52					maintained	1 0.5 C	10					
25			X		Food additives: approved & properly used	1 0.5 0			53	X				Physical facilities installed, maintained & clean	++						
	×				Toxic substances properly identified stored, & used	210			54	×				Meets ventilation & lighting requirements; designated areas used	1 0.5 0						
C	onfo	rma		wit	h Approved Procedures .2653, .2654, .2658								_	Total Deductions:	1.5						
27	Ц	Ш	X		Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	210		4						Total Deductions.							



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	Commer	<u>it Adde</u>	<u>endum to</u>	Food Es	<u>stablishi</u>	<u>ment</u>	<u>Inspectio</u>	n Report				
Establishm	ent Name: SUBWAY -	COLLEGE	PLAZA		Establishment ID: 3034011655							
Location /	Address: 2808 UNIVER	SITY PKWY	′		☑Inspection ☐Re-Inspection Date: 08/13/2019							
City: WINS	STON-SALEM	ON-SALEM State: NC					Comment Addendum Attached? Status Code: A					
County: 3	4 Forsyth		_ Zip: <u>27105</u>		Water sample taken? Yes No Category #: II							
	System: Municipal/Com				Email 1:							
Water Supp Permittee		Email 2:										
	e:_(336) 722-1400				Email 3:							
			Tempe	erature O	bservation	าร						
	C	old Hol					roos or los	e				
ltem ServSafe	Location C. Ramos 8/9/24	Temp 00	Item tuna salad	Location make unit	15 110W 4	Temp Item Location 41 pepperoni reach in		Location	Temp 41			
hot water	3 comp sink	138	ham	make unit		41	steak	walk in cooler	41			
quat sani	3 comp sink	200	lettuce	make unit		41	tomato	walk in cooler	38			
quat sani	bucket	200	tomato	make unit		41	soup	walk in cooler	32			
teri chix	make unit	43	meatball	steam well		143						
egg	make unit	43	grilled chix	steam well		176						
rotiss. chix	make unit	43	broc soup	steam well		167						
chix strips	make unit	43	chicken	reach in		41						
cleane buildu 0 pts. 20 3-501 REPE	ood residue. Food-conted. // 4-602.11 Equipment. Equipment such as .16 (A)(2) and (B) Pote .16 (A)(2) and (B) Pote .17 - Kept at half creditured 43F. TCS foods s	ent Food-tice maching	Contact Surfanes shall be contact Surfanes shall be contact standard standard shall be contact shall be cont	ces and Ute leaned at a l (Time/Temp yaki chicken	nsils-Freque frequency ne perature Con , egg patty, r	ncy - C - ecessary atrol for S rotisserie	- Ice chute in s to preclude the Safety Food), he chicken, and	soda machine soile ne accumulation of Hot and Cold Holdin chicken strips in m	d with pink soil or mold. ng - P - ake unit			
	arge (Print & Sign): Cuthority (Print & Sign):	arolina <i>Fi</i>	rst rst	Ramos	ast ast	Jo	Zen	ns Ukra	<u></u>			
	REHS ID:	2809 - P	leasants, La	uren		Verifica	ation Required [Date: / /				

REHS Contact Phone Number: (336) 703 - 3144

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: SUBWAY - COLLEGE PLAZA Establishment ID: 3034011655

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.







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