

Food Establishment Inspection Report

Score: 93

Establishment Name: CLARK'S BARBEQUE

Establishment ID: 3034010702

Location Address: 1331 HIGHWAY 66 SOUTH

☒ Inspection ☐ Re-Inspection

City: KERNERSVILLE

State: NC

Date: 04 / 20 / 2017 Status Code: A

Zip: 27284

County: 34 Forsyth

Time In: 01 : 05 ^{am}_{pm} Time Out: 04 : 20 ^{am}_{pm}

Total Time: 3 hrs 15 minutes

Permittee: CLARK'S BARBEQUE, INC.

Category #: IV

Telephone: (336) 996-8644

FDA Establishment Type: Full-Service Restaurant

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

No. of Risk Factor/Intervention Violations: 4

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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed				3	15	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible				2	1	<input checked="" type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected				3	15	0	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures				3	<input checked="" type="checkbox"/>	0	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control				1	05	0	<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used				1	05	0	<input type="checkbox"/>
34	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate				1	05	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Food Identification .2653											
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container				2	1	0	<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness				1	05	0	<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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled				1	<input checked="" type="checkbox"/>	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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean				1	<input checked="" type="checkbox"/>	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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices				<input checked="" type="checkbox"/>	1	0	<input checked="" 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	05	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Deductions:										7	

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Comment Addendum to Food Establishment Inspection Report

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City: KERNERSVILLE State: NC

County: 34 Forsyth Zip: 27284

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

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

Permittee: CLARK'S BARBEQUE, INC.

Telephone: (336) 996-8644

Establishment ID: 3034010702

☒ Inspection ☐ Re-Inspection Date: 04/20/2017

Comment Addendum Attached? ☐ Status Code: A

Category #: IV

Email 1: tigerpack2@bellsouth.net

Email 2:

Email 3:

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Randy Gentry	08/29/19	0	Tomatoes	Make unit	43	Lima beans	Hot well	144
Hot water	3 comp sink	138	Eggs	Reach-in	45	Cabbage	Hot well	142
Hot water	Dish machine	161	Hot dogs	Hot hold	168	Peach	Hot hold	144
Quat sanitizer	3 comp sink	400	Chili	Hot hold	165	Cole slaw	Walk-in cooler	46
Burger	Final	164	Beans	Hot hold	168	Cabbage	Walk-in cooler	47
Chicken	Final	186	BBQ	Hot hold	109	Baked beans	Walk-in cooler	47
Lettuce	Make unit	44	BBQ	Hot hold cabinet	122	Tomatoes	Walk-in cooler	44
Slaw	Make unit	44	Green beans	Hot well	155			

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- Upon entrance, four employee beverages (with lid and straw) stored on shelving above make unit and on prep table with can opener. Drinks shall be stored to not contaminate food, equipment, single service, or single use articles. CDI: Drinks removed from surfaces.
- 7 3-301.11 Preventing Contamination from Hands - P,PF- 0 pts. Wait staff employee touched lemon slice and placed it in cup with bare hands. Food employees may not contact exposed ready-to-eat food with their bare hands and shall use suitable utensils such as deli tissue, spatulas, tongs, single-use gloves, or dispensing equipment. CDI- Employee was instructed to use tongs when handling lemon slices and to discard beverage with lemon.
- 8 6-301.14 Handwashing Signage - C- 0 pts. Handwashing signs missing in women's restroom and at handwashing sink near dish machine. A sign or poster that notifies food employees to wash their hands shall be provided at all handwashing sinks used by food employees and shall be clearly visible to food employees. CDI- Handwashing sign provided.



Person in Charge (Print & Sign): Randy *First* Gentry *Last*

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

Randy Gentry
Eva Robert REHSI

REHS ID: 2551 - Robert, Eva

Verification Required Date: 04 / 30 / 2017

REHS Contact Phone Number: (336) 703 - 3135



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- 19 3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P- One medium size container of BBQ stored under heat lamp behind wooden block held out of temperature 109F. 5 (whole) pork shoulder held inside hold holding cabinet at 122-133F. Cooked potentially hazardous food shall be held at 135F and above. CDI- BBQ placed in oven to be reheated to 165F.
- 34 4-502.11 (B) Good Repair and Calibration - PF- 0 pts. One out of two thermometers out of calibration. Thermometers shall be in good repair and proper calibration. CDI- Person in charge calibrated thermometer.
- 42 4-901.11 Equipment and Utensils, Air-Drying Required - C- Five stacks of clean utensils were stacked wet. After washing, rinsing, and sanitizing, equipment and utensils shall be completely air-dried prior to stacking.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C- Equipment repair/replacement is needed on the following: water damaged vanity in the men's restroom; torn refrigeration gasket on make unit and walk-in cooler; door latch inside walk-in cooler; minor rusting on shelving in wait station. Equipment shall be maintained in good repair.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C- Cleaning is need inside reach-in freezer, 3 door freezer, shelving units inside walk-in cooler, condenser unit inside walk-in cooler, light cover inside walk-in cooler and shelving unit in wait station. Nonfood-contact surfaces shall be kept clean.
- 49 5-203.14 Backflow Prevention Device, When Required - P- REPEAT. ASSE 1022 installed on main water line feeding coffee and tea machine. A backflow prevention device shall be in place to prevent backsiphonage of contaminants back into the main water supply system. Install ASSE 1022 on individual water lines feeding coffee and tea machine. Verification is required on April 30th,2017 to Eva Robert at (336)703-3135 or robertea@forsyth.cc.
- 53 6-501.16 Drying Mops - C- Three mops drying upside down with mop head above handles. After use, mops shall be placed in a position that allows them to air-dry without soiling walls, equipment, or supplies.// 6-201.11 Floors, Walls and Ceilings-Cleanability - C- In men's restroom, apply trim piece to the back of the vanity, sides and seal to wall to cover gap. Properly seal the gap between FRP and counter at waitress station. Seal loose baseboard underneath three compartment sink. Seal all ceiling pipe penetrations. Physical facilities shall be easily cleanable.// 6-501.12 Cleaning, Frequency and Restrictions - C- Floor cleaning is needed throughout establishment especially around baseboards. Wall cleaning needed behind fryers, around rear handwashing sink and in pit smoking room to remove dust buildup. Physical facilities shall be kept clean.



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- 54 6-303.11 Intensity-Lighting - C- 0 pts. Low lighting measured at grill line 32-55 foot candles. Lighting shall be at least 50 foot candles in areas of food prep. Increase lighting.// 6-305.11 Designation-Dressing Areas and Lockers - C- Jacket stored on packaged buns. Jacket, hat and purse stored above ice machine. Lockers or other suitable facilities shall be provided for the orderly storage of employees' clothing and other possessions.



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