

# Food Establishment Inspection Report

Score: 94

Establishment Name: GOLDEN INDIA RESTAURANT

Establishment ID: 3034011007

Location Address: 2837 FAIRLAWN DRIVE

City: WINSTON SALEM State: North Carolina

Zip: 27106 County: 34 Forsyth

Permittee: GOLDEN INDIA INC

Telephone: (336) 777-0004

☒ Inspection ☐ Re-Inspection

## Wastewater System:

☒ Municipal/Community ☐ On-Site System

## Water Supply:

☒ Municipal/Community ☐ On-Site Supply

Date: 09/30/2022 Status Code: A

Time In: 11:50 AM Time Out: 1:55 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 2

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

Compliance Status		OUT	CDI	R	VR
<b>Supervision .2652</b>					
1	<input checked="" type="checkbox"/> OUT/N/A	PIC Present, demonstrates knowledge, & performs duties	1	0	
2	<input checked="" type="checkbox"/> OUT/N/A	Certified Food Protection Manager	1	0	
<b>Employee Health .2652</b>					
3	<input checked="" type="checkbox"/> OUT	Management, food & conditional employee; knowledge, responsibilities & reporting	2	1	0
4	<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction & exclusion	3	1.5	0
5	<input checked="" type="checkbox"/> IN	Procedures for responding to vomiting & diarrheal events	1	0.5	X
<b>Good Hygienic Practices .2652, .2653</b>					
6	<input checked="" type="checkbox"/> OUT	Proper eating, tasting, drinking or tobacco use	1	0.5	0
7	<input checked="" type="checkbox"/> OUT	No discharge from eyes, nose, and mouth	1	0.5	0
<b>Preventing Contamination by Hands .2652, .2653, .2655, .2656</b>					
8	<input checked="" type="checkbox"/> OUT	Hands clean & properly washed	4	2	0
9	<input checked="" type="checkbox"/> OUT/N/A/N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	4	2	0
10	<input checked="" type="checkbox"/> OUT/N/A	Handwashing sinks supplied & accessible	2	1	0
<b>Approved Source .2653, .2655</b>					
11	<input checked="" type="checkbox"/> OUT	Food obtained from approved source	2	1	0
12	<input checked="" type="checkbox"/> IN	Food received at proper temperature	2	1	0
13	<input checked="" type="checkbox"/> OUT	Food in good condition, safe & unadulterated	2	1	0
14	<input checked="" type="checkbox"/> IN	Required records available: shellstock tags, parasite destruction	2	1	0
<b>Protection from Contamination .2653, .2654</b>					
15	<input checked="" type="checkbox"/> OUT/N/A/N/O	Food separated & protected	3	1.5	0
16	<input checked="" type="checkbox"/> IN	Food-contact surfaces: cleaned & sanitized	3	0	X
17	<input checked="" type="checkbox"/> OUT	Proper disposition of returned, previously served, reconditioned & unsafe food	2	1	0
<b>Potentially Hazardous Food Time/Temperature .2653</b>					
18	<input checked="" type="checkbox"/> IN	Proper cooking time & temperatures	3	1.5	0
19	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper reheating procedures for hot holding	3	1.5	0
20	<input checked="" type="checkbox"/> IN	Proper cooling time & temperatures	3	1.5	0
21	<input checked="" type="checkbox"/> IN	Proper hot holding temperatures	3	1.5	0
22	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cold holding temperatures	3	1.5	0
23	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper date marking & disposition	3	1.5	0
24	<input checked="" type="checkbox"/> IN	Time as a Public Health Control; procedures & records	3	1.5	0
<b>Consumer Advisory .2653</b>					
25	<input checked="" type="checkbox"/> IN	Consumer advisory provided for raw/undercooked foods	1	0.5	0
<b>Highly Susceptible Populations .2653</b>					
26	<input checked="" type="checkbox"/> IN	Pasteurized foods used; prohibited foods not offered	3	1.5	0
<b>Chemical .2653, .2657</b>					
27	<input checked="" type="checkbox"/> OUT/N/A	Food additives: approved & properly used	1	0.5	0
28	<input checked="" type="checkbox"/> OUT/N/A	Toxic substances properly identified stored & used	2	1	0
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>					
29	<input checked="" type="checkbox"/> IN	Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan	2	1	0

## Good Retail Practices

Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Compliance Status		OUT	CDI	R	VR
<b>Safe Food and Water .2653, .2655, .2658</b>					
30	<input checked="" type="checkbox"/> IN	Pasteurized eggs used where required	1	0.5	0
31	<input checked="" type="checkbox"/> OUT	Water and ice from approved source	2	1	0
32	<input checked="" type="checkbox"/> IN	Variance obtained for specialized processing methods	2	1	0
<b>Food Temperature Control .2653, .2654</b>					
33	<input checked="" type="checkbox"/> OUT	Proper cooling methods used; adequate equipment for temperature control	1	0.5	0
34	<input checked="" type="checkbox"/> OUT	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> IN	Approved thawing methods used	1	0.5	0
36	<input checked="" type="checkbox"/> OUT	Thermometers provided & accurate	1	0.5	0
<b>Food Identification .2653</b>					
37	<input checked="" type="checkbox"/> OUT	Food properly labeled: original container	2	1	0
<b>Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657</b>					
38	<input checked="" type="checkbox"/> IN	Insects & rodents not present; no unauthorized animals	2	X	0
39	<input checked="" type="checkbox"/> IN	Contamination prevented during food preparation, storage & display	X	1	0
40	<input checked="" type="checkbox"/> OUT	Personal cleanliness	1	0.5	0
41	<input checked="" type="checkbox"/> OUT	Wiping cloths: properly used & stored	1	0.5	0
42	<input checked="" type="checkbox"/> OUT	Washing fruits & vegetables	1	0.5	0
<b>Proper Use of Utensils .2653, .2654</b>					
43	<input checked="" type="checkbox"/> OUT	In-use utensils: properly stored	1	0.5	0
44	<input checked="" type="checkbox"/> OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0
45	<input checked="" type="checkbox"/> OUT	Single-use & single-service articles: properly stored & used	1	0.5	0
46	<input checked="" type="checkbox"/> OUT	Gloves used properly	1	0.5	0
<b>Utensils and Equipment .2653, .2654, .2663</b>					
47	<input checked="" type="checkbox"/> IN	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	X	0.5	0
48	<input checked="" type="checkbox"/> OUT	Warewashing facilities: installed, maintained & used; test strips	1	0.5	0
49	<input checked="" type="checkbox"/> OUT	Non-food contact surfaces clean	1	0.5	0
<b>Physical Facilities .2654, .2655, .2656</b>					
50	<input checked="" type="checkbox"/> OUT	Hot & cold water available; adequate pressure	1	0.5	0
51	<input checked="" type="checkbox"/> OUT	Plumbing installed; proper backflow devices	2	1	0
52	<input checked="" type="checkbox"/> OUT	Sewage & wastewater properly disposed	2	1	0
53	<input checked="" type="checkbox"/> OUT	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0
54	<input checked="" type="checkbox"/> OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	0
55	<input checked="" type="checkbox"/> IN	Physical facilities installed, maintained & clean	1	0	X
56	<input checked="" type="checkbox"/> IN	Meets ventilation & lighting requirements; designated areas used	1	0.5	X
<b>TOTAL DEDUCTIONS:</b>					<b>6</b>



# Comment Addendum to Food Establishment Inspection Report

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

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Permittee: GOLDEN INDIA INC

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Establishment ID: 3034011007

☒ Inspection ☐ Re-Inspection Date: 09/30/2022

Comment Addendum Attached? ☒ Status Code: A

Water sample taken? ☐ Yes ☒ No Category #: IV

Email 1:

Email 2:

Email 3:

## Temperature Observations

**Effective January 1, 2019 Cold Holding is now 41 degrees or less**


Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Rice	reheat	208.0						
Chicken	reheat	170.0						
Cucumber Sauce	upright cooler	40.0						
Samosas	upright cooler	41.0						
Chicken	upright cooler	38.0						
Potatoes	upright cooler	38.0						
Tandoor Chicken	walk-in cooler	41.0						
Lamb	walk-in cooler	41.0						
Rice	walk-in cooler	41.0						
Onion Gravy	walk-in cooler	41.0						
Hot Water	3-compartment sink	139.0						
C. Sani	bottle	100.0						

*First*  
Person in Charge (Print & Sign): Rajinder

*First*  
Regulatory Authority (Print & Sign): Victoria

*Last*  
Kumar

*Last*  
Murphy





REHS ID: 2795 - Murphy, Victoria

REHS Contact Phone Number: (336) 703-3814

Verification Required Date:

Authorize final report to  
be received via Email: \_\_\_\_\_



North Carolina Department of Health & Human Services

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• Division of Public Health • Environmental Health Section  
DHHS is an equal opportunity employer.  
Food Establishment Inspection Report, 10/2021

• Food Protection Program



## Comment Addendum to Inspection Report

**Establishment Name:** GOLDEN INDIA RESTAURANT

**Establishment ID:** 3034011007

**Date:** 09/30/2022 **Time In:** 11:50 AM **Time Out:** 1:55 PM

### Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Rajinder Kumar		Food Service	04/29/2019	04/29/2024

### 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.

- 5 2-501.11 Clean-up of Vomiting and Diarrheal Event-PF: There was no vomit and diarrhea clean-up plan in the establishment. A food establishment shall have written procedures for employees to follow when responding to vomiting or diarrhea events that involve the discharge of vomitus or fecal matter onto surfaces in the food establishments. The procedures shall address the specific actions employees must take to minimize the spread of contamination and the exposure of employees, consumers, food, and surfaces to vomitus or fecal matter. CDI: A clean-up plan was given to the establishment.
- 16 4-602.11 Equipment Food-Contact Surfaces and Utensils - Frequency-REPEAT-P: A heavily soiled dicer was stored on the prep sink, when asked the PIC stated that the dicer is used in the establishment but wasn't used today. (A) Equipment food-contact surfaces and utensils shall be cleaned: (C) Except as specified in (D) of this section, if used with potentially hazardous food, equipment food contact surfaces and utensils shall be cleaned throughout the day at least every 4 hours. CDI: The PIC placed item in warewashing area to be cleaned.
- 38 6-501.111 Controlling Pests-C: A swarm of gnats and fruit flies were observed throughout the kitchen. The premises shall be maintained free of insects, rodents, and other pests. The presence of insects, rodents, and other pests shall be controlled to eliminate their presence on the premises;
- 39 3-305.11 Food Storage - Preventing Contamination from the Premises-REPEAT-C: Several boxes of food for grocery and restaurant are stored on the kitchen floor/food stored on floor of the walk in walk-in freezer, walk-in cooler hallway, and storage closet. Food shall be protected from contamination by storing in a clean, dry location, where it is not exposed to splash, dust, or other contamination, and at least 6 inches off the floor.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment-REPEAT-C: Short storage shelves at 3 compartment sink, prep sink and table, and shelves in the walk-in cooler are rusted and corroded/laminate is peeling off the left corner of the server station cabinets/all restroom lavatories are rusting. Equipment shall be maintained in good repair.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods-C: Replaced cracked ceiling tiles throughout the establishment. Physical facilities shall be maintained in good repair.//6-501.12 Cleaning, Frequency and Restrictions-REPEAT-C: Cleaning is needed to/on the walls in the restroom. Physical facilities shall be cleaned as often as necessary to keep them clean. \*taken to half credit due to improvement from previous inspection\*
- 56 6-303.11 Intensity - Lighting-C: The lighting in the freezer measured at 3 ft candles. The light intensity shall be: (A) At least 108 lux (10 foot candles) at a distance of 75 cm (30 inches) above the floor, in walk-in refrigeration units and dry food storage areas and in other areas and rooms during periods of cleaning.//6-403.11 Designated Areas - Employee Accommodations for eating / drinking / smoking-C: Several of the employee's items are stored on top of and co-mingled with the for sale/service items. (A) Areas designated for employees to eat, drink, and use tobacco shall be located so that food, equipment, linens, and single-service and single-use articles are protected from contamination.

### Additional Comments

The establishment has removed the dish machine and are installing a new machine. PIC instructed to contact inspector when the machine is placed in the establishment.