

# Food Establishment Inspection Report

Score: 93

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: 03/17/2023 Status Code: A

Time In: 12:45 PM Time Out: 3:00 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 1

No. of Repeat Risk Factor/Intervention Violations: 0

## 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"/> OUT	Procedures for responding to vomiting & diarrheal events	1	0.5	0
<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 OUT	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 OUT	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"/> OUT	Food-contact surfaces: cleaned & sanitized	3	1.5	0
17	<input checked="" type="checkbox"/> IN OUT	Proper disposition of returned, previously served, reconditioned & unsafe food	2	X	0
<b>Potentially Hazardous Food Time/Temperature .2653</b>					
18	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	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 OUT/N/A/N/O	Proper cooling time & temperatures	3	1.5	0
21	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Proper hot holding temperatures	3	1.5	0
22	<input checked="" type="checkbox"/> IN 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 OUT	Time as a Public Health Control; procedures & records	3	1.5	0
<b>Consumer Advisory .2653</b>					
25	<input checked="" type="checkbox"/> IN OUT	Consumer advisory provided for raw/undercooked foods	1	0.5	0
<b>Highly Susceptible Populations .2653</b>					
26	<input checked="" type="checkbox"/> IN OUT	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 OUT	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 OUT	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 OUT	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"/> IN OUT	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> OUT/N/A/N/O	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"/> OUT	Insects & rodents not present; no unauthorized animals	2	1	0
39	<input checked="" type="checkbox"/> IN OUT	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/N/A	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 OUT	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"/> IN OUT	Non-food contact surfaces clean	1	0.5	0
<b>Physical Facilities .2654, .2655, .2656</b>					
50	<input checked="" type="checkbox"/> OUT/N/A	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/N/A	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0
54	<input checked="" type="checkbox"/> IN OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	0
55	<input checked="" type="checkbox"/> IN OUT	Physical facilities installed, maintained & clean	X	0.5	0
56	<input checked="" type="checkbox"/> IN OUT	Meets ventilation & lighting requirements; designated areas used	X	0.5	0
<b>TOTAL DEDUCTIONS:</b>					<b>7</b>



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: GOLDEN INDIA RESTAURANT  
 Location Address: 2837 FAIRLAWN DRIVE  
 City: WINSTON SALEM State: NC  
 County: 34 Forsyth Zip: 27106  
 Wastewater System: ☒ Municipal/Community ☐ On-Site System  
 Water Supply: ☒ Municipal/Community ☐ On-Site System  
 Permittee: GOLDEN INDIA INC  
 Telephone: (336) 777-0004

Establishment ID: 3034011007  
☒ Inspection ☐ Re-Inspection Date: 03/17/2023  
 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 for hot holding	187.0						
Potatoes	upright cooler	39.0						
Onion Gravy	upright cooler	39.0						
Chick Pea Masala	walk-in cooler	40.0						
Samosas	walk-in cooler	38.0						
Vegetable Fritters	walk-in cooler	38.0						
Tomato Sauce	walk-in cooler	32.0						
Lentils	walk-in cooler	40.0						
Chicken	walk-in cooler	41.0						
Hot Water	3-compartment sink	143.0						
C. Sani	dish machine	50.0						
C. Sani	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

Page 1 of \_\_\_\_\_  
 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:** 03/17/2023 **Time In:** 12:45 PM **Time Out:** 3:00 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.

- 17 3-701.11 Discarding or Reconditioning Unsafe, Adulterated, or Contaminated Food-P: A bag of molded curry leaves were observed in the food service area. (A) A food that is unsafe, adulterated, or not honestly presented as specified under § 3-101.11 shall be discarded or reconditioned according to an approved procedure. CDI: The PIC discarded the item
- 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. //4-501.12 Cutting Surfaces-C: Replace badly worn and molded cutting boards. Surfaces such as cutting blocks and boards that are subject to scratching and scoring shall be resurfaced if they can no longer be effectively cleaned and sanitized, or discarded if they are not capable of being resurfaced.
- 49 4-602.13 Nonfood Contact Surfaces-REPEAT-C: Cleaning is needed inside of the upright coolers. Nonfood-contact surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues.
- 54 5-501.111 Area, Enclosures and Receptacles, Good Repair-C: The outside dumpster is rusted and busted at the seams causing a leak. Storage areas, enclosures, and receptacles for refuse, recyclables, and returnables shall be maintained in good repair
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods-REPEAT-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 following: walls in the restroom, walls and floors throughout the kitchen, and floors in the walk-in cooler. Physical facilities shall be cleaned as often as necessary to keep them clean.
- 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.