Food Establishment Inspection Report Score: 99 Establishment Name: WINGSTOP STORE #1538 Establishment ID: 3034012610 Location Address: 340 SUMMIT SQUARE BLVD Date: 02/10/2020 Status Code: A City: WINSTON SALEM State: NC Time In:  $01:10^{\circ}$  am pm Time Out: Ø 3 : 3 Ø ⊗ pm County: 34 Forsyth Zip: 27105 Total Time: 2 hrs 20 minutes AFG WS GA II, LLC Permittee: Category #: II Telephone: (336) 738-0129 FDA Establishment Type: Wastewater System: 

✓ Municipal/Community 

✓ On-Site System No. of Risk Factor/Intervention Violations: 2 No. of Repeat Risk Factor/Intervention Violations: 1 Foodborne Illness Risk Factors and Public Health Interventions Good Retail Practices 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. Public Health Interventions: Control measures to prevent foodborne illness or injury. IN OUT N/A N/O Compliance Status CDI R VR IN OUT N/A N/O Compliance Status CDI R VR Supervision .2652 Safe Food and Water .2653, .2655, .2658 PIC Present; Demonstration-Certification by accredited program and perform duties 1 🛛 🗀 28 1 0.5 0 Pasteurized eggs used where required **Employee Health** 29 🛛 🗆 Water and ice from approved source Management, employees knowledge; responsibilities & reporting 2 🛛 🗆 3 1.5 0 Variance obtained for specialized processing 30 □ □ □ ⊠ 1 0.5 0  $\times$ Proper use of reporting, restriction & exclusion 3 1.5 0 **Food Temperature Control** .2653, .2654 Proper cooling methods used; adequate equipment for temperature control **Good Hygienic Practices** .2652, .2653 1 0.5 0 31 🛛 🗆 4 🛛 210 - -Proper eating, tasting, drinking, or tobacco use 32 □ 1 0.5 0 🗆 🗆 □ □ X Plant food properly cooked for hot holding 5 П 1 0.5 0 No discharge from eyes, nose or mouth 1 0.5 0 🗆 🗆 33 🛛 🔲 🖂 Approved thawing methods used Preventing Contamination by Hands .2652, .2653, .2655, .2656 34 🗵 🗆 1 0.5 0 - -Thermometers provided & accurate 420 ---6 | X | 🗆 Hands clean & properly washed Food Identification .2653 No bare hand contact with RTE foods or pre-3 1.5 0 approved alternate procedure properly followed 35 🗆 🗷 Food properly labeled: original container 8 X Handwashing sinks supplied & accessible Prevention of Food Contamination .2652, .2653, .2654, .2656, .265 Approved Source .2653, .2655 Insects & rodents not present; no unauthorized 36 🗵 🗆 210000 9 🛛 🗆 Food obtained from approved source Contamination prevented during food 210 -37 preparation, storage & display 10 Food received at proper temperature 38 🗷 🗆 Personal cleanliness 1 0.5 0 11 🛛 🗀 Food in good condition, safe & unadulterated 39 🛛 🗀 Wiping cloths: properly used & stored 1 0.5 0 Required records available: shellstock tags, 12 🗆 21000 parasite destruction 1 0.5 0 40 🛛 🗀 Washing fruits & vegetables **Protection from Contamination** .2653, .2654 Proper Use of Utensils 3150 - -13 Food separated & protected 41 🖾 🗀 1 0.5 0 In-use utensils: properly stored 14 🗆 X 3 15 **x x x** | **x** | Food-contact surfaces: cleaned & sanitized Utensils, equipment & linens: properly stored, dried & handled 1 0.5 0 42 🛛 🗆 Proper disposition of returned, previously served 15 🖂 🗀 210 reconditioned, & unsafe food Single-use & single-service articles: properly stored & used 43 🛛 🗆 1 0.5 0 Potentially Hazardous Food Tlme/Temperature 16 ☒ ☐ ☐ ☐ Proper cooking time & temperatures 3 1.5 0 - - -44 🛛 🗆 1 0.5 0 ... Gloves used properly **Utensils and Equipment** .2653, .2654, .2663 17| 🗆 3 1.5 0 Proper reheating procedures for hot holding Equipment, food & non-food contact surfaces approved, cleanable, properly designed, 45 🗆 🗷 3 1.5 0 Proper cooling time & temperatures constructed, & used Warewashing facilities: installed, maintained, & used; test strips 19 🗆 X 3 1.5 0 Proper hot holding temperatures 46 🛛 🗆 1 0.5 0 20 🖂 3 15 0 - -Proper cold holding temperatures |47|⊠|□ Non-food contact surfaces clean 1 0.5 0 21 🔀 ☐ Proper date marking & disposition 3 1.5 0 **Physical Facilities** .2654. .2655. .2656 48 🔀 🖂 🖂 Time as a public health control: procedures & Hot & cold water available; adequate pressure 2 1 0 49 🔀 21000 Plumbing installed: proper backflow devices Consumer Advisory .2653 Consumer advisory provided for raw or 23 🗆 🗆 🔀 1 0.5 0 ... 50 🗷 🗆 Sewage & waste water properly disposed undercooked foods **Highly Susceptible Populations** .2653 Toilet facilities: properly constructed, supplied 1 0.5 0 51 🛛 🗀 Pasteurized foods used; prohibited foods not & cleaned |24| □ | □ | 🔀 Garbage & refuse properly disposed; facilities 52 🗷 1 0.5 0 Chemical .2653, .2657 maintained 25 | | | | | | 53 🔀 10.50 Food additives: approved & properly used 1 0.5 0 Physical facilities installed, maintained & clean



Toxic substances properly identified stored, & used

Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan

Conformance with Approved Procedures .2653, .2654, .2658

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Meets ventilation & lighting requirements; designated areas used

**Total Deductions:** 

210 - -

			<u>IM to Food E</u>	<u>stablishment</u>	<u>Inspectio</u>	n Report	
Establishment Name: WINGSTOP STORE #1538				Establishment ID: 3034012610			
Location Address: 340 SUMMIT SQUARE BLVD				☑Inspection ☐Re-Inspection Date: 02/10/2020			
			State: NC	Comment Addendum Attached? Status Code: A  Water sample taken? Yes No Category #: II			
County: 34 Forsyth Zip: 27105							
Wastewater	System: Municipal/Co	ommunity  On-Site	System	Email 1. LAURA.\	 WILLIAMS@ATTI	CUSFRANCHISE.CO	
Water Supply:   ✓ Municipal/Community   ☐ On-Site System							
Permittee: AFG WS GA II, LLC			Email 2:				
Telephone	e: (336) 738-0129			Email 3:			
		-	Temperature C	bservations			
		Cold Holding	, Temperature	is now 41 Deg	grees or les	iS	
Item chicken	Location final cook temp	Temp Item 201	Location	Tem	o Item	Location	Temp
blue cheese	walk in cooler	40					
ambient	walk in cooler	39.3					
corn	make unit	40					
hot water	three comp sink	125					
quat sani	three comp sink	150					
quat sani	sani bucket	150					
ServSafe	Terry B. 6/12/24	00					
		Obse	rvations and C	orrective Action	 ns		
	Violations cited in this re .14 Handwashing Sig						4
inspectand to	.11 (A) Equipment, Fotion). Two pairs on to luch. CDI- all items w .12 Food Storage Co not labeled. Working	ongs and one met ere sent to be rev ntainers Identified	al bowl were visibly vashed. I with Common Na	y soiled. Equipment, me of Food - REPE <i>l</i>	, food contact si AT- Multiple sha	urfaces shall be clo	ean to sight
	arge (Print & Sign): uthority (Print & Sign)	First James First Shannon	Miller	Last Last	MIL Hannon	1 Molan	
negulatol y At			v Charrer	_\$\igcup		JIWXXI	
	•	2826 - Malone	<u> </u>	Verif	ication Required [	Date://	<u> </u>
REHS (	Contact Phone Number:	(336)703	3 - 3 3 8 3				

North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program

DHHS is an equal opportunity employer.

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Establishment Name: WINGSTOP STORE #1538 Establishment ID: 3034012610

#### **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.



45 4-501.11 Good Repair and Proper Adjustment-Equipment - Repair/ replace two torn gaskets (one on make unit door and one on freezer unit). Equipment shall be maintained in a state of good repair.





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Observations and Corrective Actions
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Establishment Name: WINGSTOP STORE #1538 Establishment ID: 3034012610

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Establishment Name: WINGSTOP STORE #1538 Establishment ID: 3034012610

### **Observations and Corrective Actions**

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