Food Establishment Inspection Report Score: <u>96.5</u>

Establishment Name: LITTLE CAESARS #1845-4'		Establishment ID: 3034020684
Location Address: 3800 REYNOLDA RD SUITE 130		☑ Inspection ☐ Re-Inspection
City:_WINSTON SALEM	State: NC	Date: <u>Ø 2</u> / <u>1 4</u> / <u>2 Ø 2 Ø</u> Status Code: A
Zip: 27106 County: 34 Forsyth		Time In: $12:25 \overset{\bigcirc}{\otimes} pm$ Time Out: $02:10 \overset{\bigcirc}{\otimes} pm$
Permittee: THE DEATON GROUP IV, LLC		Total Time: 1 hr 45 minutes
Telephone: (336) 815-1279		Category #: _II
Wastewater System: ⊠Municipal/Community [On-Site System	FDA Establishment Type: Fast Food Restaurant
Water Supply: ⊠Municipal/Community □On-	=	No. of Risk Factor/Intervention Violations: 2

Water Supply: ⊠Municipal/Community ☐ On-Site Supply					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.			God	Good Retail Practices Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.													
П	IN	OUT	N/A	N/O	Compliance Status	OUT	CDI	R VR	IN	OUT	N/A	N/O	Compliance Status	(DUT	CD	I R VR
S	upe	rvisi	on		.2652				Safe	Food	d an	d W	ater .2653, .2655, .2658				
1	X				PIC Present; Demonstration-Certification by accredited program and perform duties	2			28 🗆		×		Pasteurized eggs used where required	1	0.5	<u> </u>	
E	mpl	oye	не Не	alth	.2652				29 🗷				Water and ice from approved source	2	1	0 🗆	
2	X				Management, employees knowledge; responsibilities & reporting	3 1.5 (30		×		Variance obtained for specialized processing	1	0.5 (
3	X				Proper use of reporting, restriction & exclusion	3 1.5 (d Ten	\Box	atur	methods e Control .2653, .2654				
G	000	ΙНу	gieni	ic Pr	actices .2652, .2653				31	ıПп	İ		Proper cooling methods used; adequate	1	0.5		
4		X			Proper eating, tasting, drinking, or tobacco use	212			32 🗵	+-	П	П	equipment for temperature control Plant food properly cooked for hot holding	1	0.5		
5	X				No discharge from eyes, nose or mouth	1 0.5 (33	+-			Approved thawing methods used	1	0.5 (+-	
P	reve	ntin	g Co	onta	mination by Hands .2652, .2653, .2655, .2656					+				H	=	+-	
6	X				Hands clean & properly washed	420			34				Thermometers provided & accurate	1	0.5	<u> </u>	
7	X				No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1.5 (d Ider	ntific	atio				7=	
8	X	П			Handwashing sinks supplied & accessible	210		1	35		Ш		Food properly labeled: original container	2	1		
ш		OVO	1 50	urce		اللالكال	عالـــارـ	-11-		$\overline{}$	n of	Foc	od Contamination .2652, .2653, .2654, .2656, .265	Т	-	_	
9	X X		1 30	uice	Food obtained from approved source	210			36				Insects & rodents not present; no unauthorized animals	2	1		
10				×	Food received at proper temperature	210			37				Contamination prevented during food preparation, storage & display	2	1	0 🗆	
\vdash	\boxtimes				Food in good condition, safe & unadulterated	210	-		38				Personal cleanliness	1	0.5	ם כ	
Н			×		Required records available: shellstock tags,	+++	+	#	39 🔀				Wiping cloths: properly used & stored	1	0.5	0 🗆	
12	roto	otio.			parasite destruction	2110			40 🗆		X		Washing fruits & vegetables	1	0.5		
		CHO	nırc	JIII C	Contamination .2653, .2654				Prop	er Us	$\overline{}$	f Ute	ensils .2653, .2654				
Н	X		Ш	Ш	Food separated & protected	3 1.3 (41	$\overline{}$			In-use utensils: properly stored	1	0.5	0 🗆	
14		X			Food-contact surfaces: cleaned & sanitized Proper disposition of returned, previously served,	3 🗶 (42 🗆				Utensils, equipment & linens: properly stored, dried & handled	1	0.5	K \Box	
ш	X				reconditioned, & unsafe food	[2][1][0			43 🗷	ıП			Single-use & single-service articles: properly	1	0.5		
\Box		ntial	y Ha	azaro	dous Food Time/Temperature .2653	3 1.5 (7	 	+-			stored & used	H			
Н	X				Proper cooking time & temperatures			1	-		and I	Faui	Gloves used properly ipment .2653, .2654, .2663	1	0.5		
Н	X] [Proper reheating procedures for hot holding	+				T	III G	Lqu	Equipment, food & non-food contact surfaces				
18	Ш	Ш	Ш	X	Proper cooling time & temperatures	+		4	45 _				approved, cleanable, properly designed, constructed, & used		×		
\vdash	X	Ш			Proper hot holding temperatures	3 1.5 (4	46 🗆				Warewashing facilities: installed, maintained, & used; test strips	1	0.5	<u> </u>	
20	X				Proper cold holding temperatures	3 1.5 (47 🗆				Non-food contact surfaces clean	×	0.5	<u> </u>	
21	X				Proper date marking & disposition	3 1.5 (sical		lities	s .2654, .2655, .2656		_	—	
22	X				Time as a public health control: procedures & records	210			48	+			Hot & cold water available; adequate pressure	2	1	+	
С	ons	ume	$\overline{}$	lvisc					49 🗆				Plumbing installed; proper backflow devices	2	1		
23			X		Consumer advisory provided for raw or undercooked foods	1 0.5 (Sewage & waste water properly disposed	2	1		
\Box	igh	y Sı		ptibl	e Populations .2653 Pasteurized foods used; prohibited foods not				51 🔀				Toilet facilities: properly constructed, supplied & cleaned	1	0.5	<u> </u>	
24	<u> </u>	<u> </u>	×		offered	3 1.5 (<u> </u>	52 🗷				Garbage & refuse properly disposed; facilities	1	0.5		
П	nen	nical	$\overline{}$.2653, .2657			1	┞┼┼	+-			maintained	Н	\vdash	+	册
25			X		Food additives: approved & properly used			1 -	53 🗆	+-			Physical facilities installed, maintained & clean Meets ventilation & lighting requirements;	1	\vdash		+ + -
\blacksquare	X onf	orm:	nce	10/1+1	Toxic substances properly identified stored, & used	211			54				designated areas used	1	U.5	KX	
Conformance with Approved Procedures .2653, .2654, .2658 27					1	Total Deductions: 3.5											





	Comme	nt Adde	ndum to	Food E	stablish	ment l	nspection	n Report				
Establishment Name: LITTLE CAESARS #1845-4'					Establishment ID: 3034020684							
Location Address: 3800 REYNOLDA RD SUITE 130					☑Inspection ☐Re-Inspection Date: 02/14/2020							
	STON SALEM			ate: NC_	Comment Addendum Attached? Status Code: A							
County: 3	4 Forsyth		Zip: 27106		Water sam	ple taken?	Yes X N					
Wastewater Water Suppl	System: Municipal/Co				Email 1:	lc.timdeato	n@gmail.com					
	y: ⊠ Municipal/Co THE DEATON GRO		on-Site System		Email 2:							
	e: (336) 815-1279				Email 3:							
			Tempe	erature O	bservatio	ns						
		Cold Hol					ees or less	s				
Item ServSafe	Location A. Julius 3/27/24	Temp 00	Item mozz sticks	Location reach in co		Temp 41		Location	Temp			
wash water	3 comp sink	118	pepperoni	reach in co	ooler	40	,					
quat sani	ppm 3 comp sink	200	sauce	walk in co	oler	35						
mozzarella	make unit	40	wings	warming c	abinet	143	-					
sausage	make unit	39	proni pizza	warming c	abinet	178						
pepperoni	make unit	41	proni pizza	final cook		181						
ham	make unit	37					.,					
gr. beef	make unit	35										
	Violations cited in this re		Observation	_				44 60 6 1 1				
drink, pts.	11 Eating, Drinking, and use tobacco in d	lesignated lo	cations to pre	event conta	mination of	food. CDI	- Manager told ensils - P- REF	employee to dis	scard gum. 0			
gallon compa and ca	clean but soiled with plastic container, an artment sink to be wa arbon buildup. Cookin ans, replace pans.	d 6 sauce b shed, rinsed	ottles. Food-c d, and sanitize	ontact surfa ed.//4-602.1	aces shall be 2 Cooking a	e clean to and Bakin	sight and touc g Equipment -	ch. CDI- Items pl C- Baking pans	aced at 3 with grease			
and sa Single had vi	11 Equipment and U anitized utensils and -Service and Single- sible food soil on its contamination. Ensur	equipment t Use Articles surface. Sto	o air dry befor -Storing - C- I re cleaned ute	re stacking. Plastic spat ensils in a c	// 4-903.11 ula stored o lean, dry loc	(A), (B) a n sanitize cation, wh	nd (D) Equipm r side drainboa ere they are no	ent, Utensils, Lir ard of 3 compart ot exposed to sp	nens and ment sink which			
Lock Text												
Damaar ! O!	own (Duint O. Ci)	<i>Fii</i> Kenyon	rst	L Caraway	.ast	1/		/				
rerson in Cha	arge (Print & Sign):	,	-04	•	004	m	wyr (my/				
Regulatory Au	uthority (Print & Sign)	<i>Fii</i> Lauren :	SI	Pleasants	.ast	L	and P	leasant	·lester			

REHS ID: 2809 - Pleasants, Lauren

Verification 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.

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Stablishment Name: LITTLE CAESARS #1845-4'	Establishment ID: 3034020684
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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.



- 4-501.11 Good Repair and Proper Adjustment-Equipment C- REPEAT- Recaulk splashguards at all handwashing sinks. Repair loose handle on upright freezer. Replace torn gaskets in right side warming cabinet and counter side warming cabinet. Equipment shall be maintained in good repair.
- 4-501.14 Warewashing Equipment, Cleaning Frequency C- Sanitizer side drainboard of 3 compartment sink and spray nozzle with visible soil and food residue. Warewashing equipment shall be cleaned: before use, throughout the day at a frequency necessary to prevent recontamination of equipment and utensils and to ensure that the equipment performs its intended function, and, if used, at least every 24 hours. Clean and sanitize drainboard before cleaned and sanitized utensils are placed there. 0 pts.
- 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils C- REPEAT- Cleaning needed on the following equipment: gaskets and doors of warming cabinets, shelves and speed racks in walk-in cooler, drink racks, wheels and castors of dough machine and all dough equipment, shelving at crazy bread station, clean dish shelving and brackets attaching shelves to wall, rolling cart, chemical storage shelf, pizza box shelves, and external surfaces of the dough press. Nonfood-contact surfaces shall be free of dust, dirt, food residue, and other debris.
- 49 5-205.15 (B) System maintained in good repair C- Repair leak in faucet at front handwashing sink. A plumbing system shall be maintained in good repair. 0 pts.
- 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods C- Recaulk handwashing sink to wall and recaulk toilet to the floor in restroom. Remove old caulk and recaulk can wash basin to wall. Replace broken tiles by prep area. Recaulk handwashing sink in restroom to the wall. Remove old caulk and recaulk 3 compartment sink to the wall. Physical facilities shall be maintained in good repair. // 6-501.12 Cleaning, Frequency and Restrictions C- Floor cleaning needed in restroom and around general perimeter, especially in corners at coved baseboards. Cleaning needed in floor drain under 3 compartment sink. Wall cleaning needed under front handwashing sink and behind dough station. Cleaning needed on ceiling tiles above the oven, and on air filter covers above the make unit and upright freezer that are very dusty. Physical facilities shall be maintained clean. 0 pts.
- 6-501.110 Using Dressing Rooms and Lockers C- Employee jackets and personal items stored on boxes of single-use lids and containers. Store personal items in designated areas to prevent contamination of items for the establishment. CDI- Manager moved all personal items to designated area. 0 pts.





Establishment Name: LITTLE CAESARS #1845-4 Establishment ID: 3034020684

Observations and Corrective Actions
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Establishment Name: LITTLE CAESARS #1845-4' Establishment ID: 3034020684

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