Food Establishment Inspection Report

Establishment Name: DE	ELI ON MAIN	Establishment ID: 3034012224
Location Address: 234 N MA City: KERNERSVILLE Zip: 27284 C	State: North Carolina	Date: 11/29/2022 Status Code: A Time In: 12:45 PM Time Out: 2:40 PM
Permittee: DELI ON MAIN I		Category#: II
Telephone : (336) 992-1300		
	○ Re-Inspection	FDA Establishment Type: Fast Food Restaurant
Wastewater System:	On-Site System	No. of Risk Factor/Intervention Violations: 0 No. of Repeat Risk Factor/Intervention Violations: 0
Municipal/Community	On-Site Supply	

		Interventions: Control measures to prevent foodborne illness	$\overline{}$		_			I		_		_			and physical objects into foods.
C	omplian	ce Status		OU	T	CDI	R	VR	-	ز(on	npi	lıa	nce	Status
Sı	pervision	.2652							s	Saf	fe F	00	d a	nd W	/ater .2653, .2655, .2658
1	OUT N/A	PIC Present, demonstrates knowledge, & performs duties	1		0				_	_	_	OUT		A	Pasteurized eggs used where required
2	OUT N/A	Certified Food Protection Manager	1		0					Ť		OUT	T	+	Water and ice from approved source
	nployee Hea	lth .2652	-		10				32	2 1	IN	OUT	×	A	Variance obtained for specialized proces methods
3)X OUT	Management, food & conditional employee; knowledge, responsibilities & reporting	2	1	0				F	0	od	Ter	npe	eratu	re Control .2653, .2654
4	ј Х оит	Proper use of reporting, restriction & exclusion	3	1.5	0				33	3	X	оит			Proper cooling methods used; adequate
5	іX оит	Procedures for responding to vomiting & diarrheal events	1	0.5	0				3/		INI	OUT	NI/	A NXC	equipment for temperature control Plant food properly cooked for hot holdir
G	ood Hygienic		_		_			1		_	_		_	A NXC	
	IX OUT	Proper eating, tasting, drinking or tobacco use	1	0.5	0			П		_		OUT		1	Thermometers provided & accurate
7)(оит	No discharge from eyes, nose, and mouth	1	0.5	0				F	0	od	lde	ntif	icati	on .2653
Pr	eventing Co	ntamination by Hands .2652, .2653, .2655, .26	56						37	7 1	X	оит	1	Т	Food properly labeled: original container
8)(о∪т	Hands clean & properly washed	4	2	0				i —		,		_	of Fo	od Contamination .2652, .2653, .2654,
	OUT N/AN/	approved alternate procedure properly followed	4		0				-	т	\neg	оит	_	T	Insects & rodents not present; no unauth animals
	OUT N/A	Handwashing sinks supplied & accessible	2	1	0			1		†	_			+	Contamination prevented during food
	proved Sou		-	1 -					39	9	×	оит			preparation, storage & display
	IN OUT IN	Food obtained from approved source Food received at proper temperature	2		0	_			40)	M	OUT	t	\top	Personal cleanliness
	N OUT	Food in good condition, safe & unadulterated	2		0			\vdash	41	ij	M	OUT			Wiping cloths: properly used & stored
		Required records available: shellstock tags	+	+	+				42	2	M	OUT	N/A	A	Washing fruits & vegetables
14	IN OUT NXAN/	parasite destruction	2	1	0				F	rc	оре	r U	se (of Ut	ensils .2653, .2654
Pr	otection fro	n Contamination .2653, .2654							43	3)	M	оит	Т	Τ	In-use utensils: properly stored
15	OUT N/A N/	Food separated & protected	3	1.5	0				44	1	Def	оит			Utensils, equipment & linens: properly st
16)(оит	Food-contact surfaces: cleaned & sanitized	3	1.5	0					ľ					dried & handled
	Ж оит	Proper disposition of returned, previously served, reconditioned & unsafe food	2	1	0				i_	ľ		оит			Single-use & single-service articles: prop stored & used
		ardous Food Time/Temperature .2653		Ta =	10	_		_	i —			OUT	_		Gloves used properly
_	IN OUT N/A N	Proper cooking time & temperatures Proper reheating procedures for hot holding	3		-	_		-	ι	Jt∈	ens	ils	and	I Equ	ipment .2653, .2654, .2663
	OUT N/AN/		3	_	-					T					Equipment, food & non-food contact surf
	NOUT N/AN/		3	-	0				47	ا	IN	OX(T			approved, cleanable, properly designed, constructed & used
22	OUT N/AN/	Proper cold holding temperatures	3	1.5	0					+	\dashv		┝	+	
23	OUT N/AN/	Proper date marking & disposition	3	1.5	0				48	3	M	оит			Warewashing facilities: installed, maintai used; test strips
24	IN OUT NAM	Time as a Public Health Control; procedures & records	3	1.5	0				49)	M	оит			Non-food contact surfaces clean
C	onsumer Ad	•			_						-			cilitie	
25	IN OUT NA	Consumer advisory provided for raw/ undercooked foods	1	0.5	0				50	ָן נ <u>ַ</u>	M	OUT	N/A	4	Hot & cold water available; adequate pre
ш	white Cusasa	•	_		_			_	51	וןי נופ	XI.	OUT	-	+	Plumbing installed; proper backflow devi Sewage & wastewater properly disposed
	IN OUT NA	Pasteurized foods used; prohibited foods not offered	3	1.5	0					┰	\neg	оит		Α.	Toilet facilities: properly constructed, sur & cleaned
	nemical	.2653, .2657							5/	,	M	оит			Garbage & refuse properly disposed; fac
	IN OUT NXA	Food additives: approved & properly used		0.5	-	_				1	-			1	maintained
	OUT N/A	Toxic substances properly identified stored & used	2	1	0					Ť	\neg	о)(т		-	Physical facilities installed, maintained & Meets ventilation & lighting requirements
	IN OUT NA	with Approved Procedures .2653, .2654, .2658 Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan	2	1	0				56	5]	×	OUT			designated areas used
	1 1 1 1 1 1	i reduced oxygen packaging chiena or nacce plan	1	1	1	1		1							TOTAL DEDUC

	G	ood	Ret	ail P	ractices: Preventative measures to control the addition of pa and physical objects into foods.	tho	gens	, cł	nemica	als,	
Compliance Status						OUT		CDI	R	VF	
Sa	afe	Food	d an	d W	ater .2653, .2655, .2658						
30	IN	оит	1)X A		Pasteurized eggs used where required	1	0.5	0		П	
31	X	OUT			Water and ice from approved source	2	1	0			
32	IN	оит	1)X A		Variance obtained for specialized processing methods	2	1	0			
Fo	ood	Ten	npei	ratui	re Control .2653, .2654						
33	X	оит			Proper cooling methods used; adequate equipment for temperature control	1	0.5	0			
34		OUT	_		Plant food properly cooked for hot holding	1	0.5	0			
35		OUT	N/A	7		1	0.5	0			
36	X				Thermometers provided & accurate	1	0.5	0			
		Ide	ntifi	catio				_			
		OUT			Food properly labeled: original container	2	1	0			
Pı	reve	entic	n o	f Fo	od Contamination .2652, .2653, .2654, .2656, .26	57					
38	M	оит			Insects & rodents not present; no unauthorized animals	2	1	0			
39		оит			Contamination prevented during food preparation, storage & display	2	1	0			
40	M	OUT			Personal cleanliness	1	0.5	0			
41		_			Wiping cloths: properly used & stored	1	0.5	0			
42	×	OUT	N/A		Washing fruits & vegetables	1	0.5	0			
Pı	rop	er Us	se o	f Uto	ensils .2653, .2654						
43	M	OUT			In-use utensils: properly stored	1	0.5	0		Ц	
44	M	оит			Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0			
45	×	оит			Single-use & single-service articles: properly stored & used	1	0.5	0			
46	×	OUT			Gloves used properly	1	0.5	0	L		
Ut	ten	sils a	and	Equ	ipment .2653, .2654, .2663						
47	Z	ѻҗт			Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	X			
48	M	оит			Warewashing facilities: installed, maintained & used; test strips	1	0.5	0			
49	M	OUT			Non-food contact surfaces clean	1	0.5	0			
Pi	hys	ical	Fac	ilitie	s .2654, .2655, .2656						
50	M	OUT	N/A		Hot & cold water available; adequate pressure	1	0.5	0			
51	÷	_			Plumbing installed; proper backflow devices	2	1	0			
52	×	OUT		Ш	Sewage & wastewater properly disposed	2	1	0		Ц	
53	×	оит	N/A		Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0			
54	×	оит			Garbage & refuse properly disposed; facilities maintained	1	0.5	0			
55	IN	о х (т			Physical facilities installed, maintained & clean	1	0.5	X			
56	×	оит			Meets ventilation & lighting requirements; designated areas used	1	0.5	0			
_	_				TOTAL DEDUCTIONS:	0					





Score: 100

Comment Addendum to Food Establishment Inspection Report Establishment ID: 3034012224 Establishment Name: DELI ON MAIN Date: 11/29/2022 Location Address: 234 N MAIN ST X Inspection Re-Inspection State: NC City: KERNERSVILLE Comment Addendum Attached? X Status Code: A County: 34 Forsyth Zip: 27284 Water sample taken? Yes X No Category #: II Email 1:rancell@triad.rr.com Municipal/Community On-Site System Water Supply: Permittee: DELI ON MAIN LLC Email 2: Telephone: (336) 992-1300 Email 3: Temperature Observations Effective January 1, 2019 Cold Holding is now 41 degrees or less Item Location Temp Item Location Temp Item Temp 51 Au Jus 12:45 Cooling on Ice in Reach In 39 Au Jus 1:15 Cooling on Ice in Reach In 168 Potato Soup Hot Hold 39 Pasta Salad Hot Hold 40 Sliced Turkey Reach In 40 Sliced Ham Reach In 40 Deli Case Ambient 39 Deli Case Pastrami 38 Deli Case Sliced Turkey 40 Sliced Ham Deli Case 39 Flip Top Turkey 38 Turkey Flip Top 39 Ham Flip Top 36 Tomato Flip Top 38 Lettuce Flip Top 38 Corned Beef Flip Top 100 Spray Bottle Sanitizer Chlorine 100 Sanitizer Chlorine 3 Compartment Sink 134 Hot Water 3 Compartment Sink 0 Jo Ancell CFPM ServeSafe 4-28-2027 **First** Last Ancell Person in Charge (Print & Sign): Jo Last

Regulatory Authority (Print & Sign): Glen Pugh

REHS ID:3016 - Pugh, Glen Verification Required Date:

REHS Contact Phone Number: (336) 703-3164

Authorize final report to be received via Email:





Comment Addendum to Inspection Report

Establishment Name: DELI ON MAIN Establishment ID: 3034012224

Date: 11/29/2022 Time In: 12:45 PM Time Out: 2:40 PM

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.

- 47 4-501.11 Good Repair and Proper Adjustment Equipment (C) Equipment shall be maintained in good repair. ***The deli case has a large amount of ice build up on heat exchange and the drain is clogged (a pan is in place to catch the
- 55 6-501.11 Repairing Premises, Structures, Attachments, and Fixtures Methods (C) Physical facilities shall be maintained in good repair. ***The walls in the restroom are bowed out and coming loose from the structure.