

# Food Establishment Inspection Report

Score: 96

Establishment Name: SONIC #3538

Establishment ID: 3034014096

Location Address: 528 NELSON STREET

City: KERNERSVILLE State: North Carolina

Zip: 27284 County: 34 Forsyth

Permittee: BOOM OF NORTH CAROLINA, INC.

Telephone: (336) 992-9504

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: 9:25 AM Time Out: 11:15 AM

Category#: II

FDA Establishment Type: Fast Food Restaurant

No. of Risk Factor/Intervention Violations: 1

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"/> 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 <input checked="" type="checkbox"/>				
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 <input checked="" type="checkbox"/> N/A/N/O				
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"/> 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"/> 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"/> OUT/N/A/N/O				
Proper cooling time & temperatures		3	1.5	0	
21	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Proper hot holding temperatures		3	1.5	0	
22	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> T/N/A/N/O				
Proper cold holding temperatures		3	0	X	X
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 <input checked="" type="checkbox"/> N/A/N/O				
Time as a Public Health Control; procedures & records		3	1.5	0	
<b>Consumer Advisory .2653</b>					
25	<input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/>				
Consumer advisory provided for raw/undercooked foods		1	0.5	0	
<b>Highly Susceptible Populations .2653</b>					
26	<input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/>				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
<b>Chemical .2653, .2657</b>					
27	<input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/>				
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 <input checked="" type="checkbox"/>				
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 <input checked="" type="checkbox"/>				
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 <input checked="" type="checkbox"/>				
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/N/A <input checked="" type="checkbox"/>				
Plant food properly cooked for hot holding		1	0.5	0	
35	<input checked="" type="checkbox"/> IN OUT/N/A <input checked="" type="checkbox"/>				
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: proper 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"/> OUT				
Contamination prevented during food preparation, storage & display		2	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 <input checked="" type="checkbox"/> T				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		X	0.5	0	X
48	<input checked="" type="checkbox"/> OUT				
Warewashing facilities: installed, maintained & used; test strips		1	0.5	0	
49	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> T				
Non-food contact surfaces clean		1	0.5	X	
<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"/> IN <input checked="" type="checkbox"/> T/N/A				
Toilet facilities: properly constructed, supplied & cleaned		1	0.5	0	X
54	<input checked="" type="checkbox"/> OUT				
Garbage & refuse properly disposed; facilities maintained		1	0.5	0	
55	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> T				
Physical facilities installed, maintained & clean		X	0.5	0	X
56	<input checked="" type="checkbox"/> OUT				
Meets ventilation & lighting requirements; designated areas used		1	0.5	0	
<b>TOTAL DEDUCTIONS:</b>					<b>4</b>



# Comment Addendum to Food Establishment Inspection Report

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 Wastewater System:  Municipal/Community  On-Site System  
 Water Supply:  Municipal/Community  On-Site System  
 Permittee: BOOM OF NORTH CAROLINA, INC.  
 Telephone: (336) 992-9504

Establishment ID: 3034014096  
 Inspection  Re-Inspection Date: 03/17/2023  
 Comment Addendum Attached?  Status Code: A  
 Water sample taken?  Yes  No Category #: II  
 Email 1: store3538@sonicpartnernet.com  
 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
coleslaw	flip top	49						
footlong	reach in cooler	49						
hotdog	reach in cooler	48						
ambient	reach in cooler	50						
lettuce	flip top	38						
toamtoes	flip top	40						
corn dog	reach in cooler	37						
lettuce	reach in cooler	40						
sausage	hot hold	154						
milk	reach in cooler	40						
tomatoes	walk in cooler 9:50	59						
tomatoes	walk in cooler 10:05	57						
hotdog	walk in cooler 9:51	58						
hotdog	walk in cooler 10:05	54						
corn dog	walk in cooler	41						
cheese	walk in cooler	41						
quat sanitizer	3 comp sink (ppm)	300						
hot water	3 comp sink	122						
burger	cook to	165						
chili	reheat for hot holding	158						

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

*Last* Scott



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

*Last* Craver

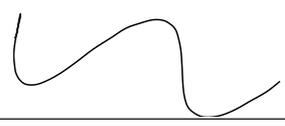


REHS ID: 2848 - Craver, Shannon

Verification Required Date:

REHS Contact Phone Number: (336) 703-3137

Authorize final report to be received via Email:




# Comment Addendum to Inspection Report

Establishment Name: SONIC #3538

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Date: 03/17/2023 Time In: 9:25 AM Time Out: 11:15 AM

## Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Lindsey Scott	22797902	Food Service	10/23/2022	10/23/2027

## 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.

- 22 3-501.16 (A) (2) and (B) Time / Temperature Control for Safety Food, Hot and Cold Holding (P). The flip top unit and reach in cooler by the hot dog station had slaw at 49F and hot dogs at 49F and 48F. The ambient of the unit was 50F.  
\*\*(A)(2) Time/temperature control for safety food shall be maintained at 41F or less.  
\*\*CDI the slaw and hotdogs were discarded and the unit is not being used until service can be done on the unit. All foods are to be placed into the large flip top.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C). - The hot dog stations flip top unit is not maintaining foods at 41F or less. - The doors to the walk in cooler and walk in freezer is rusted and needs to be repaired. - The floor in the walk in cooler and walk in freezer is loose. - The inside of the door to the reach in freezer is cracked. - The Prince Castle hot hold unit is still not working and they are waiting on a piece.  
\*\*(A) Equipment shall be maintained in a state of repair and condition.
- 49 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (C). - The floor in the walk in cooler and walk in freezer needs to be cleaned. - The inside of the tall reach in freezer needs to be cleaned. - Behind the lids on the flip tops need to be cleaned. - The fan guards in the walk in cooler need to be cleaned. - The vents and the outside of the ice machine units need to be cleaned.  
\*\*Nonfood-contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris.
- 53 6-302.11 Toilet Tissue, Availability (Pf): No toilet tissue present in mens restroom.  
\*\*A supply of toilet tissue shall be available at each toilet.  
CDI: Toilet tissue replaced.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) REPEAT: Replace broken or missing ceiling tiles. - Replace or repair the missing and damaged floor tiles throughout the facility.  
\*\*Physical facilities shall be maintained in good repair.
- 6-501.12 Cleaning, Frequency and Restrictions (C)- REPEAT: - Clean the floor beside the ice machine where cups and other debris are. - Clean around the fryers and the grill. - Clean the wall above and below the 3 compartment sink.  
\*\*Physical facilities shall be cleaned as often as necessary to keep them clean.
- 6-201.13 Floor and Wall Junctures, Coved, and Enclosed or Sealed (C): Add coved base wear missing in front of walk in cooler and freezer where diamond plate makes ninety degree angle.  
\*\*(A) In food establishments in which cleaning methods other than water flushing are used for cleaning floors, the floor and wall junctures shall be coved and closed to no larger than 1mm.
- 6-201.17 Walls and Ceilings, Attachments (C): Sleeve chains of ceiling attachments so that chains are easily cleanable.  
\*\*Attachments to walls and ceilings such as light fixtures, mechanical room ventilation system components, vent covers, wall mounted fans, and other items shall be easily cleanable.