

Food Establishment Inspection Report

Score: 99

Establishment Name: MARIO'S PIZZA

Establishment ID: 3034012747

Location Address: 266 HARVEY ST.

City: WINSTON SALEM State: North Carolina

Zip: 27103 County: 34 Forsyth

Permittee: MARIO'S PIZZA OF STRATFORD RD. INC.

Telephone: (336) 701-5550

☒ Inspection ☐ Re-Inspection

Wastewater System:

☒ Municipal/Community ☐ On-Site System

Water Supply:

☒ Municipal/Community ☐ On-Site Supply

Date: 01/26/2023 Status Code: A

Time In: 12:25 PM Time Out: 2:30 PM

Category#: IV

FDA Establishment Type: _____

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
Supervision .2652					
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	
Employee Health .2652					
3	<input checked="" type="checkbox"/> OUT	Management, food & conditional employee; knowledge, responsibilities & reporting	2	1	X
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
Good Hygienic Practices .2652, .2653					
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
Preventing Contamination by Hands .2652, .2653, .2655, .2656					
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
Approved Source .2653, .2655					
11	<input checked="" type="checkbox"/> OUT	Food obtained from approved source	2	1	0
12	<input checked="" type="checkbox"/> 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"/> OUT/N/A/N/O	Required records available: shellstock tags, parasite destruction	2	1	0
Protection from Contamination .2653, .2654					
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
Potentially Hazardous Food Time/Temperature .2653					
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"/> 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"/> OUT/N/A/N/O	Time as a Public Health Control; procedures & records	3	1.5	0
Consumer Advisory .2653					
25	<input checked="" type="checkbox"/> IN OUT	Consumer advisory provided for raw/undercooked foods	1	0.5	0
Highly Susceptible Populations .2653					
26	<input checked="" type="checkbox"/> IN OUT	Pasteurized foods used; prohibited foods not offered	3	1.5	0
Chemical .2653, .2657					
27	<input checked="" type="checkbox"/> IN OUT	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
Conformance with Approved Procedures .2653, .2654, .2658					
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
Safe Food and Water .2653, .2655, .2658					
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
Food Temperature Control .2653, .2654					
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"/> IN OUT	Approved thawing methods used	1	0.5	0
36	<input checked="" type="checkbox"/> OUT	Thermometers provided & accurate	1	0.5	0
Food Identification .2653					
37	<input checked="" type="checkbox"/> OUT	Food properly labeled: original container	2	1	0
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657					
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"/> IN	Wiping cloths: properly used & stored	1	0.5	0
42	<input checked="" type="checkbox"/> OUT/N/A	Washing fruits & vegetables	1	0.5	0
Proper Use of Utensils .2653, .2654					
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
Utensils and Equipment .2653, .2654, .2663					
47	<input checked="" type="checkbox"/> OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	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"/> OUT	Non-food contact surfaces clean	1	0.5	0
Physical Facilities .2654, .2655, .2656					
50	<input checked="" type="checkbox"/> OUT/N/A	Hot & cold water available; adequate pressure	1	0.5	0
51	<input checked="" type="checkbox"/> IN	Plumbing installed; proper backflow devices	2	1	X
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"/> OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	0
55	<input checked="" type="checkbox"/> OUT	Physical facilities installed, maintained & clean	1	0.5	0
56	<input checked="" type="checkbox"/> IN	Meets ventilation & lighting requirements; designated areas used	1	0.5	0
TOTAL DEDUCTIONS:					1



Comment Addendum to Food Establishment Inspection Report

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County: 34 Forsyth Zip: 27103

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Water Supply: ☒ Municipal/Community ☐ On-Site System

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☒ Inspection ☐ Re-Inspection Date: 01/26/2023

Comment Addendum Attached? ☒ Status Code: A

Water sample taken? ☐ Yes ☒ No Category #: IV

Email 1: cesarininfantemendez@gmail.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
Tomato	pizza unit	39	Sliced tomato	walk in cooler	37			
Sliced mushroom	pizza unit	38	Mozzarella	walk in cooler	38			
Ham	pizza unit	39	Marinara sauce	walk in cooler	37			
Beef	pizza unit	39	Sliced ham	walk in cooler	38			
Bacon	pizza unit	39	Hot water	3 compartment sink	149			
Mozzarella	pizza unit	39	Quat sanitizer	3 compartment sink (ppm)	200			
Sliced susage	pizza unit	39						
Spinach	cooling @ 12:38	63						
Spinach	cooling @ 12:40	59						
Philly steak	final cook	202						
Marinara sauce	hot hold cabinet	140						
Lettuce	sandwich unit top	39						
Mozzarella	sandwich unit top	39						
Ham	sandwich unit top	39						
Sliced tomato	sandwich unit top	39						
Mushroom	sandwich unit top	39						
Sausage	sandwich unit bottm	39						
Side salad	sandwich unit bottom	39						
Meatball in sacue	steamwell	154						
Marinara sauce	steamwell	158						

First

Person in Charge (Print & Sign): Cesar

First

Regulatory Authority (Print & Sign): Elizabeth

Last

Infante

Last

Manning

Cesar I. M.

Elizabeth Manning

REHS ID: 3136 - Manning, Elizabeth

REHS Contact Phone Number: (336) 703-3135

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

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Establishment ID: 3034012747

Date: 01/26/2023 **Time In:** 12:25 PM **Time Out:** 2:30 PM

Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Infante Cesar		Food Service		04/30/2024

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.

- 3 2-102.11 (C) (2), (3) and (17) Demonstration (Pf) Based on the Risks inherent to the food operation, during inspections and upon request the person in charge shall demonstrate to the regulatory authority knowledge of foodborne disease prevention, application of the hazard analysis and critical control point principles, and the requirements of this code. CDI: REHSI provided a copy during the inspection.
- 41 3-304.14 Wiping Cloths, Use Limitations (C) Wiping cloth sanitizer bucket had a concentration of 0 ppm. Cloths in-use for wiping counters and other equipment surfaces shall be: (1) Held between uses in a chemical sanitizer solution at a concentration specified by the manufacture. CDI: Sanitizer whipping cloth bucket was remade to a concentration of 200 ppm.
- 51 5-203.14 Backflow Prevention Device, When Required (P) Pistol gun attachment was on to the hose at the can wash and did not have the proper backflow preventer. A plumbing system shall be installed to preclude backflow of a solid, liquid, or gas contaminant into the water supply system at each point of use at the food establishment, including on a hose bibb if a hose is attached or on a hose bibb if a hose is not attached and backflow prevention is required by LAW, by: (A) Providing an air gap as specified under § 5-202.13 P; or (B) Installing an approved backflow prevention device. CDI: The attachment was taken off the hose.
- 56 6-403.11 Designated Areas - Employee Accommodations for eating / drinking / smoking- An employee phone was found charging on a bag of flour, and 4 case container of the monster sports drink for employee use was stored on a bag of chicken in the reach in freezer. Areas designated for employees to eat, drink, and use tobacco shall be located so that food, equipment and single use articles are protected from contamination. CDI: Items were placed in the designated employee bin.