

# Food Establishment Inspection Report

Score: 96

Establishment Name: 66 PIZZERIA GRILL AND BAR

Establishment ID: 3034011382

Location Address: 3440 FRONTIS ST

City: WINSTON SALEM State: North Carolina

Zip: 27103 County: 34 Forsyth

Permittee: EPEROS INC

Telephone: (336) 293-6688

☒ Inspection ☐ Re-Inspection ☐ Educational Visit**Wastewater System:**☒ Municipal/Community ☐ On-Site System**Water Supply:**☒ Municipal/Community ☐ On-Site Supply

Date: 03/20/2024

Status Code: A

Time In: 12:45 PM

Time Out: 3:45 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

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
<b>Supervision .2652</b>							
1	IN	<input checked="" type="checkbox"/>	N/A	PIC Present, demonstrates knowledge, & performs duties	1	<input checked="" type="checkbox"/>	X
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	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	IN	OUT	<input checked="" type="checkbox"/>	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	IN	OUT	<input checked="" type="checkbox"/>	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	IN	OUT	<input checked="" type="checkbox"/>	Time as a Public Health Control; procedures & records	3	1.5	0
<b>Consumer Advisory .2653</b>							
25	<input checked="" type="checkbox"/>	OUT	N/A	Consumer advisory provided for raw/undercooked foods	1	0.5	0
<b>Highly Susceptible Populations .2653</b>							
26	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"/>	OUT	N/A	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	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	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	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"/>	OUT	N/A/N/O	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/>	OUT	N/A/N/O	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: 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	IN	<input checked="" type="checkbox"/>	T	Contamination prevented during food preparation, storage & display	2	X	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	IN	<input checked="" type="checkbox"/>	T	In-use utensils: properly stored	1	<input checked="" type="checkbox"/>	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	IN	<input checked="" type="checkbox"/>	T	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	X	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
<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	IN	<input checked="" type="checkbox"/>	T	Plumbing installed; proper backflow devices	2	X	0
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	IN	<input checked="" type="checkbox"/>	T	Physical facilities installed, maintained & clean	1	<input checked="" type="checkbox"/>	0
56	IN	<input checked="" type="checkbox"/>	T	Meets ventilation & lighting requirements; designated areas used	1	0.5	X
<b>TOTAL DEDUCTIONS:</b>				4			



# Comment Addendum to Food Establishment Inspection Report

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County: 34 Forsyth Zip: 27103  
Wastewater System: ☒ Municipal/Community ☐ On-Site System  
Water Supply: ☒ Municipal/Community ☐ On-Site System  
Permittee: EPEROS INC  
Telephone: (336) 293-6688

Establishment ID: 3034011382  
☒ Inspection ☐ Re-Inspection Date: 03/20/2024  
☐ Educational Visit Status Code: A  
Comment Addendum Attached? ☒ Category #: IV  
Email 1: dpaloumbas@gmail.com  
Email 2:  
Email 3:

## Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
ham/WIC	40				
broccoli salad/salad bar	40				
cheese/salad bar	40				
hot water/3 compartment sink	120				
quat sanitizer/3 compartment sink	300				
hot water/dish machine	177				
wings/cooling 1 hour	88				
chicken/prep 1	39				
pico/prep 2	40				
cheese/prep 3	39				
tomato/prep 4	39				
chili/hot holding	155				
soup/hot holding	165				
sausage/pizza prep	39				
sour cream/glass door cooler	39				
milk/dessert cooler	39				

First  
Person in Charge (Print & Sign): Konstantinos

Last  
Koutsoupas

First  
Regulatory Authority (Print & Sign): Amanda

Last  
Stevens

*K Koutsoupas*

*A Stevens*

REHS ID: 2543 - Stevens, Amanda

Verification Dates: Priority: 03/22/2024

Priority Foundation:

Core:

REHS Contact Phone Number: (336) 703-3129

Authorize final report to  
be received via Email: \_\_\_\_\_



North Carolina Department of Health & Human Services

Page 2 of \_\_\_\_\_  
● Division of Public Health ● Environmental Health Section  
DHHS is an equal opportunity employer.  
Food Establishment Inspection Report, 12/2023

● Food Protection Program



## Comment Addendum to Inspection Report

**Establishment Name:** 66 PIZZERIA GRILL AND BAR

**Establishment ID:** 3034011382

**Date:** 03/20/2024 **Time In:** 12:45 PM **Time Out:** 3:45 PM

### Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Konstantinos Koutsoupas	24699444	Food Service		

### 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.

- 1 2-103.11 Person in Charge (B) (Pf) Employees child observed in kitchen at beginning of inspection. PIC shall ensure rules in the code for food safety and handling are met by (B) PERSONS unnecessary to the FOOD ESTABLISHMENT operation are not allowed in the FOOD preparation, FOOD storage, or WAREWASHING areas, except that brief visits and tours may be authorized by the PERSON IN CHARGE if steps are taken to ensure that exposed FOOD; clean EQUIPMENT, UTENSILS, and LINENS; and unwrapped SINGLE-SERVICE and SINGLE-USE ARTICLES are protected from contamination; Pf CDI Child removed from kitchen. 0 points.
- 39 3-305.11 Food Storage - Preventing Contamination from the Premises (C) Ribs stored directly on shelf inside right most prep cooler.. Store food in a clean, dry location, not exposed to contamination. CDI. Ribs discarded.
- 43 3-304.12 In-Use Utensils, Between-Use Storage (C) Ice scoops stored in holder that is visibly soiled. Store in-use utensils in a clean, dry place, in food with handles out, in 135F or greater water or in running water which quickly moves food particles to the drain.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) REPEAT violation. Back reach-in freezer has a broken handle. Make unit lid next to hand sink has a broken handle. Panels missing from pizza prep cooler and salad cooler near pizza oven. Broken handle on hot holding unit for potatoes. Interior of door to WIC damaged. Shelf brackets needed inside worktop cooler. Racks in WIC heavily rusted and in need of replacement. Equipment shall be maintained in good repair. Equipment components such as doors, seals, hinges, fasteners, and kick plates shall be kept intact, tight, and adjusted.  
4-205.10 Food Equipment, Certification and Classification (C) Non-working cooler used in waitstaff area for storage of single use items. Remove cooler if not used for refrigeration. Except for toasters, mixers, microwave ovens, water heaters, and hoods, food equipment shall be used in accordance with the manufacturer's intended use and certified or classified for sanitation by an ANSI-accredited certification program.
- 51 5-203.14 Backflow Prevention Device, When Required (P) Backflow prevention device on water line for coffee maker across from dish pit area but not on tea urn. Install ASSE 1022 backflow prevention device within 3 days. Contact Amanda Stevens at 336-703-3129 when compliant. Verification required. Prevent backflow or backsiphonage at each point of use in a water supply system by installing an approved backflow device.  
5-205.15 (B) Maintain a plumbing system in good repair. Leaky pipe connecting to water heater. Repair.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) PIC has begun to regrout floors in kitchen in sections. Continue to regrout floors where grout is low. Regrout floor throughout kitchen where low. Adjust back door to close completely with no gaps between door and frame. Floors, walls, and ceilings including the attachments such as soap and towel dispensers; light fixtures; and heat/ac vents shall be maintained in good repair. Repeat violation. Improvement started.
- 56 6-303.11 Intensity - Lighting (C) Lighting low at ice machine and nearby table with microwave. (32-36 footcandles) Increase lighting to 50 footcandles in food prep areas. Lighting low at mens room toilet, vanity and urinal (4-14 ftcdnl) and ladies room toilet (12 ftcdnl). Increase lighting to 20 footcandles at plumbing fixtures. 0 points.

### Additional Comments

Excellent hand washing observed this inspection