

Food Establishment Inspection Report

Score: 99

Establishment Name: MAGUEY MEXICAN RESTAURANT, EL

Establishment ID: 3034011571

Location Address: 4625 YADKINVILLE RD

City: PFAFFTOWN State: North Carolina

Zip: 27040 County: 34 Forsyth

Permittee: EL MAGUEY INC

Telephone: (336) 924-6553

Inspection Re-Inspection

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 06/20/2022 Status Code: A

Time In: 1:05 PM Time Out: 2:50 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 2

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	0
4	<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction & exclusion	3	1.5	0
5	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Procedures for responding to vomiting & diarrheal events	1	0.5	X X
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"/> IN <input checked="" type="checkbox"/> OUT	Hands clean & properly washed	4	2	X X
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"/> IN <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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O	Time as a Public Health Control; procedures & records	3	1.5	0
Consumer Advisory .2653					
25	<input checked="" type="checkbox"/> OUT/N/A	Consumer advisory provided for raw/undercooked foods	1	0.5	0
Highly Susceptible Populations .2653					
26	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Pasteurized foods used; prohibited foods not offered	3	1.5	0
Chemical .2653, .2657					
27	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> 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
Conformance with Approved Procedures .2653, .2654, .2658					
29	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	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"/> 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
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"/> 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
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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	X
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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Plumbing installed; proper backflow devices	2	X	0 X 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"/> OUT	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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 Permittee: EL MAGUEY INC
 Telephone: (336) 924-6553

Establishment ID: 3034011571
 Inspection Re-Inspection Date: 06/20/2022
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: IV
 Email 1:
 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
ServSafe	Reyes Ambros 6/26/26	0	chorizo	1 door reach in	38			
hot water	3 comp sink	140	chile relleno	2 door reach in	41			
chlorine sanitizer	3 comp sink	50	cheese dip	walk in cooler	39			
hot water	dish machine	144	taquitos	walk in cooler	39			
chlorine sanitizer	dish machine	50	salsa	server cooler	40			
chicken	final cook	171						
shrimp	final cook	161						
steak	final cook	152						
mushrooms	final cook	161						
rice	hot holding	151						
beans	hot holding	164						
cheese dip	hot holding	167						
ground beef	hot holding	154						
shrimp	on ice cooled	40						
pico de gallo	on ice cooled	39						
pico de gallo	make unit	41						
shredded cheese	make unit	41						
carnitas	reach in	40						
tomatoes	drawers	38						
steamed broccoli	drawers	38						

Person in Charge (Print & Sign): Eliseo *First* Ponce *Last*
 Regulatory Authority (Print & Sign): Lauren *First* Pleasants *Last*

Eliseo Ponce

Lauren Pleasants

REHS ID: 2809 - Pleasants, Lauren

Verification Required Date: 06/23/2022

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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Comment Addendum to Inspection Report

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Establishment ID: 3034011571

Date: 06/20/2022 **Time In:** 1:05 PM **Time Out:** 2:50 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.

- 5 2-501.11 Clean-up of Vomiting and Diarrheal Event (Pf)- Establishment does not have written procedures for the clean-up of vomiting and diarrheal events. A food establishment shall have written procedures for employees to follow when responding to vomiting or diarrheal events that involve the discharge of vomitus or fecal matter onto surfaces in the food establishment. The procedures shall address the specific actions employees must take to minimize the spread of contamination and the exposure of employees, consumers, food, and surfaces to vomitus or fecal matter. CDI- Copy of written procedures provided by REHS. 0 pts.
- 8 2-301.12 Cleaning Procedure (P)/
2-301.14 When to Wash (P) - Food employee used the correct handwashing procedure but followed it by touching the paper towel dispenser handle with bare hands. To avoid recontaminating the hands, dispense paper towel first then use the paper towel to turn off the faucet and to retrieve more paper towels from the dispenser. Hands shall be washed any time they become contaminated. CDI- Employee washed hands correctly with a paper towel as a barrier. 0 pts.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) - Shelves are rusting in server salsa cooler. Wrap condensate lines from the fan boxes in the walk in cooler and walk in freezer with PVC wrapping. Maintain equipment in good repair. 0 pts.
- 51 5-205.15 (B) System Maintained in Good Repair (C)- Repeat- Both handwashing sinks in the kitchen have leaks at the faucet. Repair leaks and maintain plumbing in good repair. Person in charge stated new faucets are going to replace the leaky ones.
- 5-202.14 Backflow Prevention Device, Design Standard (P) - At outdoor can wash, a splitter has been put on the hose bibb and the right side hose needs a backflow prevention device rated for continuous pressure if the pistol grip spray nozzle is to remain attached to the hose. A backflow or backsiphonage prevention device installed on a water supply system shall meet ASSE standards for construction, installation, maintenance, inspection, and testing for that specific application and type of device. Install a backflow prevention device rated for continuous pressure on the right side of the splitter between the splitter and hose. Verification required by 6/23/22 of installation of a backflow prevention device. Contact Lauren Pleasants at (336)703-3144 or pleasaml@forsyth.cc when complete.