

Food Establishment Inspection Report

Score: 97.5

Establishment Name: TACO BELL 3940

Establishment ID: 3034014126

Location Address: 2437 LEWISVILLE-CLEMMONS ROAD

City: CLEMMONS State: North Carolina

Zip: 27012 County: 34 Forsyth

Permittee: CHARTER CENTRAL LLC

Telephone: (336) 766-0107

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

Date: 12/02/2022 Status Code: A

Time In: 12:45 PM Time Out: 2:10 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	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
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"/> IN 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"/> IN OUT	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"/> IN OUT	Food-contact surfaces: cleaned & sanitized	3	0	X
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"/> IN OUT/N/A/N/O	Proper cooking time & temperatures	3	1.5	0
19	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Proper reheating procedures for hot holding	3	1.5	0
20	<input checked="" type="checkbox"/> IN 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 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"/> 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"/> OUT	Wiping cloths: properly used & stored	1	0.5	0
42	<input checked="" type="checkbox"/> IN OUT	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"/> IN OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	X
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 OUT	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	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"/> OUT	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0
54	<input checked="" type="checkbox"/> IN OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	X
55	<input checked="" type="checkbox"/> IN OUT	Physical facilities installed, maintained & clean	1	0.5	X
56	<input checked="" type="checkbox"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0
TOTAL DEDUCTIONS:					2.5



Comment Addendum to Food Establishment Inspection Report

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☒ Inspection ☐ Re-Inspection Date: 12/02/2022
 Comment Addendum Attached? ☒ Status Code: A
 Water sample taken? ☐ Yes ☒ No Category #: IV
 Email 1: cclifford@charterfoods.net
 Email 2: development@charterfoods.net
 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
diced tomatoes	prep cooler (base)	39						
shredded lettuce	prep cooler (top)	41						
diced tomatoes	prep cooler (top)	41						
ground beef	steam table	165						
refried beans	steam table	193						
potato bites	hot hold above prep	137						
guacamole	walk-in cooler	36						
chicken	hot holding cabinet	168						
hot water	3 comp sink	122						
quat sanitizer	3 comp sink and towel bucket (nm)	200						

First
 Person in Charge (Print & Sign): Valerie
 First
 Regulatory Authority (Print & Sign): Aubrie

Last
 Lindsay
 Last
 Welch

Valerie Lindsay
Aubrie Welch REHS

REHS ID: 2519 - Welch, Aubrie
 REHS Contact Phone Number: (336) 703-3131

Verification Required Date: _____

Authorize final report to
 be received via Email: _____



North Carolina Department of Health & Human Services

Page 1 of _____
 DHHS is an equal opportunity employer.
 Food Establishment Inspection Report, 10/2021

• Division of Public Health • Environmental Health Section • Food Protection Program



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Establishment ID: 3034014126

Date: 12/02/2022 **Time In:** 12:45 PM **Time Out:** 2:10 PM

Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Valerie Lindsay		Food Service		01/18/2024

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.

- 16 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (Pf) Greasy residue present on plastic beige containers, metal container, lever-type scoop. Sticker residue on blue plastic containers. Food contact surfaces shall be clean to sight and touch. CDI - placed at 3 comp sink for re-cleaning.
- 44 4-901.11 Equipment and Utensils, Air-Drying Required (C) On the clean utensils shelving, one stack of metal containers were wet stacked. After cleaning and sanitizing, equipment, and utensils: shall be air dried or used after adequate draining. Please correct prior to next inspection to avoid a point deduction.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) Repeat - Repair damaged handle on Star Pro-Max press. Equipment shall be maintained in good repair.
- 54 5-501.13 Receptacles (C) REPEAT - A crack was observed on the bottom corner of the orange dumpster. Receptacles and waste handling units for refuse, recyclables, and returnables and for use with materials containing food residue shall be durable, cleanable, insect - and rodent resistant, leakproof, and nonabsorbent.
- 5-501.114 Using Drain Plugs (C) REPEAT - Both dumpsters are missing drain plugs. Drains in receptacles and waste handling units or refuse recyclables, and returnables shall have drain plugs in place.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) REPEAT - A loose floor tile and missing/low grout in front of the 3 compartment sink. Finish ceiling around inset lights above front counter. Re-seat ceiling tile in back kitchen near first drive-thru window. Re-seal baseboard to front of metal can wash. Physical facilities shall be maintained in good repair.
- 6-501.12 Cleaning, Frequency and Restrictions (C) REPEAT - Clean dust from around ceiling vents. Physical facilities shall be cleaned as often as necessary to keep them clean.