## Food Establishment Inspection Report

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	Establis	hment Name: ZITO PIZZERIA AND G	RILL						E	Es	stablishment ID: 3034012273				
	Location Address: 3030 HEALY DRIVE											_			
City: WINSTON SALEM State: North Carolina							Date: 09/21/2022 Status Code: _A								
Zip: <u>27103</u> County: <u>34 Forsyth</u>							Time In: 11:16 AM Time Out: 1:32 PM								
Permittee: KEFALONIA INC.															
<b>Telephone:</b> (336) 765-9486							Category#: III								
	-					FDA Establishment Type: Full-Service Restaurant									
	🔇 Insp														
	Wastewa	ter System:									2				
	🐼 Mun	icipal/Community On-Site Syster	n					Ν	lo.	of	of Risk Factor/Intervention Violations: 3				
	Water Su							Ν	lo. d	of I	of Repeat Risk Factor/Intervention Violations: 1				
	🐼 Mun	icipal/Community On-Site Supply	/												
Γ						Г					Or and Datall Drasting a	-			
		e Illness Risk Factors and Public Health					_				Good Retail Practices				
		contributing factors that increase the chance of developing for		less.			G	iood	Reta	ail I	ail Practices: Preventative measures to control the addition of pathogens, chemicals,				
	Public Health	nterventions: Control measures to prevent foodborne illnes	is or injury								and physical objects into foods.				
0	Complianc	e Status	OUT	CDI R	VR	0	Cor	mp	liar	nce	ce Status OUT CDI R V	/F			
s	upervision	.2652	1 1		-	5	Safe	Foo	d an	d V	d Water .2653, .2655, .2658				
		PIC Present, demonstrates knowledge, &	1 0						r NXA		Pasteurized eggs used where required 1 0.5 0	-			
-		performs duties	1 0								Water and ice from approved source   2   1   0				
2	OUT N/A	Certified Food Protection Manager	1 0								Variance obtained for specialized processing	-			
E	mployee Healt	n .2652		•		32		001	r 🖗		methods 2 1 0				
3		Management, food & conditional employee;	2 1 🗙	x		F	000	d Tei	mper	ratu	ature Control .2653, .2654				
		knowledge, responsibilities & reporting		^			Т	1	Ť.			-			
	Колт	Proper use of reporting, restriction & exclusion Procedures for responding to vomiting &	3 1.5 0			33	3 🕅		r		Proper cooling methods used; adequate equipment for temperature control 1 0.5 0				
5	in oXt	diarrheal events	1 005 0	XX		34	1 IN	OUT	N/A	NXC		-			
G	ood Hygienic I	Practices .2652, .2653							N/A						
	<b>X</b> OUT	Proper eating, tasting, drinking or tobacco use	1 0.5 0					001		<u> </u>	Thermometers provided & accurate 1 0.5 0	_			
7	ОUT	No discharge from eyes, nose, and mouth	1 0.5 0			F	000	d Ide	ntifi	cati	ation .2653				
		amination by Hands .2652, .2653, .2655, .26	56			3	7 1)	(ou	r	Γ	Food properly labeled: original container 2 1 0	-			
8	Хоит	Hands clean & properly washed	4 2 0							f Fo	Food Contamination .2652, .2653, .2654, .2656, .2657				
9	OUT N/AN/O	No bare hand contact with RTE foods or pre-	4 2 0			—	T	1	1	Γ		_			
		approved alternate procedure properly followed Handwashing sinks supplied & accessible	2 X 0	x		31	3 🕅	OUT	r		Insects & rodents not present; no unauthorized animals				
		<u> </u>	2 1 0	^		-					Contamination prevented during food				
	pproved Source					39	) IN	X	r		preparation, storage & display X 1 0 X				
		Food obtained from approved source Food received at proper temperature	2 1 0 2 1 0			40	) IN	<b>X</b>	r		Personal cleanliness 1 05 0 X	-			
		Food in good condition, safe & unadulterated	2 1 0					OUT			Wiping cloths: properly used & stored   1   0.5   0				
		Required records available: shellstock tags,				42	2 🕅	OUT	N/A		Washing fruits & vegetables 1 0.5 0	_			
14 IN OUT NANYO Parasite destruction 2 1 0								er U	se o	fU	f Utensils .2653, .2654				
Р	rotection from	Contamination .2653, .2654				4:	3 🕅	OUT	r		In-use utensils: properly stored 1 0.5 0				
15	IX OUT N/AN/O	Food separated & protected	3 1.5 0					o)∢1			Utensils, equipment & linens: properly stored,	_			
16	Холт	Food-contact surfaces: cleaned & sanitized	3 1.5 0			-	•	~			dried & handled 1 0X5 0 X	_			
17	Хоит	Proper disposition of returned, previously served,	2 1 0			4	5 IN	2	r		Single-use & single-service articles: properly 1 0.5 K X				
		reconditioned & unsafe food						1.		-					
		rdous Food Time/Temperature .2653 Proper cooking time & temperatures	3 1.5 0				-	OU			Gloves used properly 1 0.5 0	_			
		Proper reheating procedures for hot holding	3 1.5 0		+	l	Jten	sils	and	Eq	Equipment .2653, .2654, .2663				
		Proper cooling time & temperatures	3 1.5 0		$\vdash$						Equipment, food & non-food contact surfaces				
21	IN OUT N/ANO	Proper hot holding temperatures	3 1.5 0			47	r IN	X	'		approved, cleanable, properly designed, 1 0 to X constructed & used				
22	X OUT N/AN/O	Proper cold holding temperatures	3 1.5 0			┝	-	+	-	-					
23	OUT N/AN/O	Proper date marking & disposition	3 1.5 0			41	B 🕅	OUT	r		Warewashing facilities: installed, maintained & 1 0.5 0				
24		Time as a Public Health Control; procedures & records	3 1.5 0			49	X	OUT	r	$\vdash$	Non-food contact surfaces clean   1   0.5   0				
С	onsumer Advis				L j		-	-	-	ilitie	lities .2654, .2655, .2656				
		Consumer advisory provided for raw/	1050				-		N/A		Hot & cold water available; adequate pressure 1 0.5 0	-			
25		undercooked foods	1 0.5 0			51	I X	OUT	r		Plumbing installed; proper backflow devices 2 1 0				
Н	lighly Suscepti	ble Populations .2653						OUT			Sewage & wastewater properly disposed 2 1 0	_			
26		Pasteurized foods used; prohibited foods not	3 1.5 0			5	3 04	ou	N/A		Toilet facilities: properly constructed, supplied				
		offered					+	-	-	-					
		.2653, .2657 Food additives: approved & properly used	1 0.5 0			54	1 M	OUT	r		Garbage & refuse properly disposed; facilities maintained 1 0.5 0				
		Toxic substances properly identified stored & used			$\vdash$	5	5 IN	<b>X</b>	r	$\vdash$	Physical facilities installed, maintained & clean 1 0% 0 X				
		th Approved Procedures .2653, .2654, .2658		I							Meets ventilation & lighting requirements;	_			
		Compliance with variance, specialized process,				5	<b>"</b> "	OUT	'		designated areas used 1 0.5 0	_			
29		reduced oxygen packaging criteria or HACCP plan	2 1 0								TOTAL DEDUCTIONS: 5.5				

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# Comment Addendum to Food Establishment Inspection Report

Establishment Name: ZITO PIZZERIA AND GRI	LL	Establishment ID: 3034012273				
Location Address: <u>3030 HEALY DRIVE</u> City: <u>WINSTON SALEM</u>	State:NC	X Inspection Re-Inspection Comment Addendum Attached? X	Date: <u>09/21/2022</u> Status Code: <u>A</u>			
County: 34 Forsyth Zip:	27103	Water sample taken? Yes X No	Category #: III			
Wastewater System: X Municipal/Community On-Site Water Supply: X Municipal/Community On-Site		Email 1:zitopizzeriaaandgrill@gmail.com				
Permittee: KEFALONIA INC.		Email 2:				
Telephone: (336) 765-9486		Email 3:				
Temperature Observations						

		Tomp		adono			
Effective January 1, 2019 Cold Holding is now 41 degrees or less							
Item Lettuce	Location salad cooler	Temp Item 39	Location	Temp Item	Location	Temp	
Tomato	salad cooler	38					
Cucumber	salad cooler	38					
Spinach	salad cooler	40					
Pizza sauce	pizza cooler	36					
Pepperoni	pizza cooler	32					
Sausage	pizza cooler	36					
Mozzerella	pizza cooler	31					
Gyro meat	pizza cooler	38					
Fries	pizza cooler	40					
Potato wedges	walk in cooler	40					
Chicken	walk in cooler	38					
Pizza dough	walk in cooler	41					
Quat sanitizer	3 compartment sink (ppm)	400					
Hot water	3 compartment sink	135					

<i>First</i> Person in Charge (Print & Sign): Victoria	<i>Last</i> Manginas	Knongna				
First	Last	alle alle and a				
Regulatory Authority (Print & Sign): Elizabeth	Manning	WYOVER (I' MM				
REHS ID:3136 - Manning, Elizabeth	Verification Required Date:					
REHS Contact Phone Number: (336) 703-3135		inal report to d via Email:				
North Carolina Department of Health & Human Services Page 1 of Food Establishment Inspection Report, 10/2021						

Establishment Name: ZITO PIZZERIA AND GRILL

### Establishment ID: 3034012273

Date: 09/21/2022 Time In: 11:16 AM Time Out: 1:32 PM

Certifications							
Name	Certificate #	Туре	Issue Date	Expiration Date			
Victoria Manginas		Food Service		02/22/2024			

#### **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 2-201.11 (A), B), (C), and (E) Responsibility of Permit Holder, Person in Charge and Conditional Employees (P) The employee health policy provided during the inspection did not include both types of salmonella (typhi and non-typhoidal). Thepermit holder shall require food employees and conditional employees to report to the person in charge information about their health and activities as they relate to diseases that are transmissible through food. A food empoyee orconditional employee shall report the information in a manner that allows the person in charge to reduce the risk of foodborne disease transmission, including providing necessary additional information, such as the date of onset of symptoms and an illness, or of a diagnosis without symptoms, if the food employee or conditional employee. CDI: REHSI provide a copy of the updated employee health policy that includes both types of salmonella (typhi/non-typhoidal)
- 5 2-501.11 Clean-up of Vomiting and Diarrheal Event (Pf)(REPEAT) No vomit and diarrheal clean up procedure were available during the inspection. A food establishment shall have written procedures for employees to follow when responding to vomiting or diarrheal events. CDI: REHSI provided a copy during the inspection. PIC advised to assemble kit.
- 10 5-205.11 Using a Handwashing Sink Operation and Maintenance (Pf) A bottle of handwashing soap was stored in the basin of the handwashing sink. A handwashing sink shall be maintained so that it is accessible at all times for employee use. CDI: Soap was moved from the basin of the handwashing sink.

6-301.12 Hand Drying Provision (Pf) No paper towels were available in the men's restroom. Each handwashing sink or group of adjacent handwashing sinks shall be provided with: A continuous towel system that supplies the user with a clean towel. CDI: Paper towels were provided during the inspection

- 39 3-305.11 Food Storage Preventing Contamination from the Premises (C)(REPEAT) Bags of flour were observed on the floor in the back storage area, and two bag of potatoes were stored on the floor by the prep sink. Food shall be protected from contamination by storing the food: (1) In a clean, dry location; (2) Where it is not exposed to splash, dust, or other contamination; and (3) At least 15 cm (6 inches) above the floor. CDI: All items were moved up an off the floor.
- 40 2-402.11 Effectiveness Hair Restraints (C) 2-303.11 Prohibition Jewelry (C)(REPEAT) Food employee observed preparing food without hair restraint. Use head coverings, beard guards and clothing to restrain body hair from contacting exposed food, equipment, and utensils. Remove jewelry on hands and arms while preparing food. A plain ring, such as a wedding band, is allowed.
- 44 4-903.11 (A), (B), and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles Storing (C) Multiple single service items (pizza boxes, cups, etc.) were observed stored on the floor., cleaned equipment and utensils, laundered linens, and single-service and single-use articles shall be stored: (1) In a clean, dry location; (2) Where they are not exposed to splash, dust, or other contamination; and (3) At least 15 cm (6 inches) above the floor. CDI: All items were moved and stored up and off the floor.
- 45 4-904.11 Display and handle single-use and single-service articles to prevent contamination. A container hold forks for dinning service were stored mouth in up. Single-service and single-use articles (to go boxes) were being stored with the with the inside facing up. (A)Single-service and single-use articles and cleaned and sanitized utensils shall be handled, displayed, and dispensed so that contamination of food- and lip-contact surfaces is prevented. (B) Knives, forks, and spoons that are not prewrapped shall be presented so that only the handles are touched by employees and by consumers if consumer self-service is provided. CDI: All items were inverted to limit possible contamination.
- 47 4-501.11 Good Repair and Proper Adjustment Equipment (C) (REPEAT)(with improvements made) Reattach gasket on the bottom of pizza prep unit. PIC stated that middle prep unit cooler is not working. Equipment shall be in good repair.
- 55 6-202.14 Toilet rooms, enclosed (C)(REPEAT) Employee restroom door does not close properly due to misalignment and bad repair of mechanism. Toilet rooms shall be enclosed and have tight-fitting, self closing doors.
   6-501.11 Repairing Premises, Structures, Attachments, and Fixtures Methods (C) Reattach panel above the salad prep area, and re-caulk 3 compartment sink where mold is present.

#### **Additional Comments**

Office: 336-703-3135 Work: 336-462-1991 Office: manninet@forsyth.cc