Food Establishment Inspection Report

Establishment Name: SUBWAY

	E	st	ab	lis	shment Name: SUBWAY						
	L	oca	atio	on /	Address: 6794 SHALLOWFORD RD						
	С	City	: <u>L</u> E	ΞW	/ISVILLE State: North Ca	ro	lina	а			
	Zip: 27023County: 34 Forsyth										
	Ρ	eri	mi	tte	e: SIMMONS FOOD SERVICES INC						
	Т	ele	pł	nor	ne: (336) 945-6445						
			•		ection O Re-Inspection			_			
	v				ater System:						
	-				nicipal/Community On-Site System						
	v	-			apply:						
	•				nicipal/Community O On-Site Supply						
		V	<i>y</i> 1v	u							
	Fc	ood	bo	orne	e Illness Risk Factors and Public Health Ir	٦te	erv	er	ntion	s	
	Ris	sk fa	cto	rs: (Contributing factors that increase the chance of developing foo	db	orne	e illr	ness.		
	Pu	blic	Hea	alth	Interventions: Control measures to prevent foodborne illness	or	inju	ry			
C	ò	mp	lia	nc	e Status	(OUT	Г	CDI	R	VR
S	upe	ervis	ion		.2652	-					-
1	N	оυт	N/A		PIC Present, demonstrates knowledge, &	1		0			
	Ľ.	оυт			performs duties Certified Food Protection Manager		-	\vdash			
2	1	1				1		0			
	T	loye		ean	h .2652 Management, food & conditional employee;						
3	Ľ.	ουτ			knowledge, responsibilities & reporting	2	1	0			
4	<u> </u>	ουτ		\square	Proper use of reporting, restriction & exclusion Procedures for responding to vomiting &	3	1.5				
5	ıX.	OUT			diarrheal events	1	0.5	0			
				nic	Practices .2652, .2653	4	0.5				1
7	1.	OUT OUT		\square	Proper eating, tasting, drinking or tobacco use No discharge from eyes, nose, and mouth	1 1	0.5	-			<u> </u>
P		-	-	Cont	tamination by Hands .2652, .2653, .2655, .265	6					
8	X	оит			Hands clean & properly washed	4	2	0			
9	X	оυт	N/A	N/O	No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	4	2	0			
10	M	оит	N/A		Handwashing sinks supplied & accessible	2	1	0			-
A	ppi	rove	d S	ouro	ce .2653, .2655						
	<u>, , ,</u>	оит			Food obtained from approved source	2	1	0			
12 13	-	OUT OUT	-	NX0	Food received at proper temperature Food in good condition, safe & unadulterated	2	1	0			
	<u> </u>				Required records available: shellstock tags,	\vdash					-
14	IN	ουτ	1986	N/O	parasite destruction	2	1	0			
					Contamination .2653, .2654						
		OUT	_	N/O	Food separated & protected Food-contact surfaces: cleaned & sanitized	3 3	1.5 1.5	-			
17		ол			Proper disposition of returned, previously served,	2	1.5	0			-
					reconditioned & unsafe food	2	1	0			
		ntia OUT			ardous Food Time/Temperature .2653 Proper cooking time & temperatures	3	1.5	0			
		OUT				3	1.5	-			
20	-	оит	_	1		3	1.5				
21 22	1	OUT OUT				3 3	1.5 1.5	-			
23		о)(т				Х	-	-	X	Х	
24	IN	оит	NXA	N/O	Time as a Public Health Control; procedures & records	3	1.5	0			
C	ons	sum	er A	dvi	sory .2653	_					
25	T	олт	T		Consumer advisory provided for raw/	1	0.5	0			
					undercooked foods	1	0.5				
	Ē	<u> </u>		ΓĪ	ble Populations .2653 Pasteurized foods used; prohibited foods not	T					
26	IN	оυт	NXA		offered	3	1.5	0			
		nica			.2653, .2657		10				
27 28		OUT OUT	1 .		Food additives: approved & properly used Toxic substances properly identified stored & used	1 2	0.5	0	$\left - \right $		-
		1	-		rith Approved Procedures .2653, .2654, .2658	17	_ <u>*</u>	1.0			I
29		оит			Compliance with variance, specialized process,	2	1	0			
	[1	reduced oxygen packaging criteria or HACCP plan					-	
					North Carolina Department of Health &	H	uma	n S	ervice	es • C	IVISIO

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Establishment ID: 3034011529

Date: 01/31/2023	_Status Code: A						
Time In: 10:15 AM	Time Out:12:00 PM						
Category#: II							
FDA Establishment Type: Fast Food Restaurant							
No. of Risk Factor/Intervention Violations: 1							
No. of Repeat Risk Factor/Intervention Violations: 1							

	~		n et		Good Retail Practices	ila -				al c	
	G	ood	Reta	all Pi	ractices: Preventative measures to control the addition of par and physical objects into foods.	noç	yens	, cr	iemica	aís,	
С	or	npl	iar	ice	Status		OUT		CDI	R	VR
Sa	ıfe	Food	l an	d Wa	ater .2653, .2655, .2658						
_	_	OUT	Ŋ X A		Pasteurized eggs used where required	1	0.5	0			
31	X	OUT			Water and ice from approved source	2	1	0			
32	IN	оит	¢¥^		Variance obtained for specialized processing methods	2	1	0			
F	ood	Tem	nper	atur	e Control .2653, .2654						
33	×	оит			Proper cooling methods used; adequate equipment for temperature control	1	0.5	0			
34	IN	оυт	N/A	NX0	Plant food properly cooked for hot holding	1	0.5	0			-
		оит	N/A	N/O	Approved thawing methods used	1	0.5	0			
36	X	OUT			Thermometers provided & accurate	1	0.5	0			
		Ider	ntific	atio	n .2653						
37	X	OUT			Food properly labeled: original container	2	1	0			
P	eve	entio	n of	Foo	od Contamination .2652, .2653, .2654, .2656, .26	57					
38	M	оит			Insects & rodents not present; no unauthorized animals	2	1	0			
39	M	оит			Contamination prevented during food preparation, storage & display	2	1	0			
		OUT			Personal cleanliness	1	0.5	0			
_		OUT			Wiping cloths: properly used & stored	1	0.5	0			
42	2 0 OUT N/A Washing fruits & vegetables 1 0.5 0										
P	ор	er Us	se o	f Ute	ensils .2653, .2654						
43	M	OUT			In-use utensils: properly stored	1	0.5	0			
44	M	оит			Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0			
	~	оит			Single-use & single-service articles: properly stored & used	1	0.5	0			
46	M	OUT			Gloves used properly	1	0.5	0			
U	ten	sils a	and	Equi	ipment .2653, .2654, .2663						
47	×	оит			Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	0			
48	M	оит			Warewashing facilities: installed, maintained & used; test strips	1	0.5	0			
49	M	Ουτ			Non-food contact surfaces clean	1	0.5	0			
Р	nys	ical I	Faci	lities	s .2654, .2655, .2656						
		OUT	N/A		Hot & cold water available; adequate pressure	1	0.5	0			
		OUT		$ \vdash $	Plumbing installed; proper backflow devices	2	-	0			
		Ουτ		\vdash	Sewage & wastewater properly disposed Toilet facilities: properly constructed, supplied	2	1	0			
_		оит			& cleaned Garbage & refuse properly disposed; facilities	1	0.5	0			
		OUT			maintained	1	0.5				
55	M	OUT			Physical facilities installed, maintained & clean	1	0.5	0			
56	M	оит			Meets ventilation & lighting requirements; designated areas used	1	0.5	0			
					TOTAL DEDUCTIONS:	3					

Comment Addendum to Food Establishment Inspection Report

Establishment	Name: SUBWAY

Location Address: 6794 SHALLOWFORD RD							
City: LEWISVILLE	State:NC						
County: 34 Forsyth	Zip: 27023						
Wastewater System: 🛛 Municipal/Community 🗌	On-Site System						
Water Supply: X Municipal/Community	On-Site System						
Permittee: SIMMONS FOOD SERVICES	S INC						

Establishment ID: 3034011529

X Inspection Re-Inspection	Date: 01/31/2023
Comment Addendum Attached? X	Status Code: A
Water sample taken? Yes X No	Category #: II

Email 1:simmonsfoodserv@yahoo.com

Emoil	n .
Email	∠.

Email 3:

Telephone:	(336)	945-6445
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Temperature Observations Effective January 1, 2019 Cold Holding is now 41 degrees or less Location Temp Item Location Temp Item Location Temp ltem Servsafe -40 00 Mark Simmons chicken tenders pizza make unit 4/24/2026 40 132 hot water 3-comp sink sliced ham backup reach-in 400 38 qt sanitizer (ppm) 3-comp sink sliced turkey backup reach-in 200 40 qt sanitizer (ppm) sani bucket sliced tomatoes walk-in cooler 38 41 sliced tomatoes make unit (left) tuna salad walk-in cooler 34 40 ground beef make unit (left) pepperoni walk-in cooler 36 38 ground sausage make unit (left) rottiserie chicken walk-in cooler 38 pepperoni make unit (left) 40 shredded cheese make unit (left) 38 sliced turkey make unit (right) 40 steak make unit (right) 36 sliced roast beef make unit (right) 38 tuna salad make unit (right) 39 teriyaki chicken make unit (right) 40 make unit (right) rotisserie chicken 173 meatballs steam well 184 potato soup steam well broccoli cheddar

ground sasuage pizza make unit 41		
<i>First</i> Person in Charge (Print & Sign): Mark	<i>Last</i> Simmons	\mathcal{N}
First	Last	\mathcal{O}
Regulatory Authority (Print & Sign): Travis	Addis	- Je
	Marifia atian Dansina d Datas	

177

40

• Food Protection Program

REHS ID:3095 - Addis, Travis

steam well

pizza make unit

Verification Required Date:

REHS Contact Phone Number:

Authorize final report to be received via Email:



soun

ground beef

North Carolina Department of Health & Human Services D Page 1 of _____

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Establishment ID: 3034011529

Date: 01/31/2023 Time In: 10:15 AM Time Out: 12:00 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.

23 3-501.17 Ready-To-Eat Time / Temperature Control for Safety Food, Date Marking (Pf) REPEAT. Several containers of ready-to-eat foods in the right side make unit and walk-in cooler were not date marked. In right make unit: 1 container of sliced roast beef, 1 container of buffalo chicken, 1 container of teriyaki chicken, 1 container of capicola, 1 container of steak, and 1 container of tuna salad. In walk-in cooler: 2 containers of tuna salad. Make sure to clearly date all TCS foods held more than 24 hours so that it can be easily idenitfied by employees and the REHS. Ready-to-eat, time/temperature control for safety food prepared and held in a food establishment for more than 24 hours shall be clearly marked to indicate the date or day by which the food shall be consumed on the premises, sold, or discarded when held at a temperature of 41F or less for a maximum of 7 days. The day of preparation shall be counted as Day 1. CDI: All items were appropriately date marked with their time of preparation. (3 pts)