

# Food Establishment Inspection Report

Score: 97

Establishment Name: CAMEL CITY BARBECUE FACTORY

Establishment ID: 3034012407

Location Address: 701 NORTH LIBERTY STREET

City: WINSTON SALEM State: North Carolina

Zip: 27101 County: 34 Forsyth

Permittee: CAMEL CITY EVENTS LLC

Telephone: (336) 306-9999

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

Date: 05/24/2023 Status Code: A

Time In: 10:30 AM Time Out: 12:45 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
<b>Supervision .2652</b>					
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	
<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	<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
<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"/> IN	Food-contact surfaces: cleaned & sanitized	3	1.5	X
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	<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 OUT	Time as a Public Health Control; procedures & records	3	1.5	0
<b>Consumer Advisory .2653</b>					
25	<input checked="" type="checkbox"/> IN OUT	Consumer advisory provided for raw/undercooked foods	1	0.5	0
<b>Highly Susceptible Populations .2653</b>					
26	<input checked="" type="checkbox"/> IN OUT	Pasteurized foods used; prohibited foods not offered	3	1.5	0
<b>Chemical .2653, .2657</b>					
27	<input checked="" type="checkbox"/> IN OUT	Food additives: approved & properly used	1	0.5	0
28	<input checked="" type="checkbox"/> IN	Toxic substances properly identified stored & used	2	X	0
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>					
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
<b>Safe Food and Water .2653, .2655, .2658</b>					
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
<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	<input checked="" type="checkbox"/> OUT	Contamination prevented during food preparation, storage & display	2	1	0
40	<input checked="" type="checkbox"/> IN	Personal cleanliness	1	0.5	X
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	<input checked="" type="checkbox"/> IN	In-use utensils: properly stored	1	0.5	X
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	<input checked="" type="checkbox"/> IN	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	<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 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"/> IN	Physical facilities installed, maintained & clean	X	0.5	0
56	<input checked="" type="checkbox"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0
TOTAL DEDUCTIONS: 3					



# Comment Addendum to Food Establishment Inspection Report

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☒ Inspection ☐ Re-Inspection Date: 05/24/2023

Comment Addendum Attached? ☒ Status Code: A

Water sample taken? ☐ Yes ☒ No Category #: IV

Email 1: camelcitybbq@gmail.com

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
Salmon	Final	165	Collard Greens	Hot Well	183			
Chicken Thigh	Final	166	French Fry	Reheat	193			
Salmon	Cooling (from final)	101	Ambient	Lemon Cooler	37			
Chicken Thigh	Cooling (from final)	109	Baked Beans	Holding Cabinet	138			
Slaw	Make Cooler	41	Whole Shoulder	Holding Cabinet	170			
Meat Loaf	Make Cooler	39	Mac and Cheese	Holding Cabinet	157			
Salad	Make Unit	38	Diced Tomato	Produce Upright Cooler	38			
Salmon	Make Unit	40	Hot Water	Prep Sink	128			
Cut Tomato	Make Unit	37	Quat Sanitizer	Three-Comp	200			
Potato Salad	Make Unit	39	Hot Water	Dish Machine	180			
Chicken Wing	Sandwich Unit	38	BBQ Slaw	Walkin	39			
Diced Tomato	Sandwich Unit	37	Chicken Wing	Walkin	39			
Brisket	Chef Table	40	Smoked Turkey	Walkin	40			
Turkey	Chef Table	39	Ambient	Dressing Cooler	35			
Pork	Holding Cabinet	135						
Ribs	Holding Cabinet	143						
Baked Beans	Hot Well	168						
Mashed Potato	Hot Well	166						
Chicken	Hot Well	161						
Pulled Pork	Hot Well	158						

Person in Charge (Print & Sign): *First* Louis

*Last* Doumas

Regulatory Authority (Print & Sign): *First* Ebonie

*Last* Wilborn

*Louis Doumas*

*Ebonie Wilborn*

REHS ID: 3122 - Wilborn, Ebonie

Verification Required Date: 06/02/2023

REHS Contact Phone Number:

Authorize final report to  
be received via Email:



North Carolina Department of Health & Human Services

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DHHS is an equal opportunity employer.  
Food Establishment Inspection Report, 10/2021

• Food Protection Program



## Comment Addendum to Inspection Report

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**Date:** 05/24/2023 **Time In:** 10:30 AM **Time Out:** 12:45 PM

### Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Louis Doumas	22588809	Food Service	09/06/2022	09/06/2027

### 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 4-602.11 Equipment Food-Contact Surfaces and Utensils - Frequency (C) The ice machine upstairs has pink and black soil present on top surface of ice shield. Surfaces of equipment contacting food that is not time/temperature control for safety shall be cleaned at a frequency specified by the manufacturer, or absent manufacturer specifications, at a frequency necessary to preclude accumulation of soil or mold.
- 28 7-102.11 Common Name - Working Containers (Pf) Chemical bottle found in dish area did not have a label with content. Person in charge unsure of what was inside bottle. Working containers used for storing poisonous or toxic materials such as cleaners and sanitizers taken from bulk supplies shall be clearly and individually identified with the common name of the material. CDI Chemical bottle was poured out.
- 40 2-303.11 Prohibition - Jewelry (C) Employee wearing watch while working with food. Remove jewelry on hands and arms while preparing food. A plain ring, such as a wedding band, is allowed.
- 43 3-304.12 In-Use Utensils, Between-Use Storage (C) Scoop handle was contacting food inside BBQ slaw container. Store in-use utensils in a clean, dry place, in food with handles out.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) REPEAT End caps missing to shelf holding seasonings. Lemon and dessert cooler shelves have rusting on tips. Sandwich unit has a torn gasket on top drawer. Top two drawers at chef table coolers have torn gaskets. 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.
- 4-202.11 Food-Contact Surfaces - Cleanability (Pf) At least four wire fryer baskets found with in poor conditions with wires separating from corners. Multiuse food-contact surfaces shall be smooth, in good repair, free of sharp angles, and finished to have smooth seams and joints. CDI Inspector will return by 6/2 to verify baskets have been replaced. Invoice may be emailed to wilboret@forsyth.cc
- 55 6-501.12 Cleaning, Frequency and Restrictions (C) REPEAT Cleaning needed throughout on walls and ceiling where splashing is occurring and around vents where dust has accumulated. Clean flashing behind chefs table. Clean floors under equipment along cookline, back prep area and in dry storage room. All physical facilities shall be maintained in good repair and shall be cleaned as often as necessary to keep them clean and by methods that prevent contamination of food products.
- 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) Remove/replace caulk at hood and seafood prep sink. Low grout present in front of dish machine. 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.