FOOD ESTABLISHMENT INSPECTION	Re	υU	I L						50	ore: <u>s</u>	<u> 7.5</u>	<u> </u>
Establishment Name: SBARRO'S ITALIAN EATERY 4	.09						_E	St	ablishment ID: 3034020136			
Location Address: 3320 SILAS CREEK PKWY									X Inspection ☐ Re-Inspection			
City: WINSTON-SALEM	State	. N	IC			Da	ate	: 1	LØ / Ø 8 / QØ 1 9 Status Code: A			
Zip: 27103 County: 34 Forsyth	Otato	. –				Ti	me	– Ir	ı: <u>Ø 1 ∶ 1 5 ⊗ pm</u> Time Out: <u>Ø 3</u> ∶ <u>Ø</u>	Ø 🛇 ai	m m	
									ime: 1 hr 45 minutes	<b>&amp;</b> pi		
						C	ate	go	ry #: II			
Telephone: (336) 768-9724									stablishment Type: Fast Food Restaurant			
Wastewater System: ⊠Municipal/Community [				stei	m				Risk Factor/Intervention Violations:	4		
Water Supply: ⊠Municipal/Community □ On-	Site S	upp	oly						Repeat Risk Factor/Intervention Viola			
Foodbassa Illanda Diela Foodassa and Dublic Hoolide late	4:								Cond Datail Drastings			
Foodborne Illness Risk Factors and Public Health Int Risk factors: Contributing factors that increase the chance of developing foodbox.					Good	d Re	tail F	Prac	Good Retail Practices tices: Preventative measures to control the addition of patho	gens, chei	micals.	,
Public Health Interventions: Control measures to prevent foodborne illness or	r injury.								and physical objects into foods.			
IN OUT N/A N/O Compliance Status	OUT	CDI	R VR			OUT			<u> </u>	OUT	CDI R	R VR
Supervision .2652  1  PIC Present; Demonstration-Certification by correlated program and partners of the program a				_	afe F			d W	, ,			
1 ⊠ □ □ PIC Present; Demonstration-Certification by accredited program and perform duties  Employee Health .2652	2 0			╌	×				Pasteurized eggs used where required	1 0.5 0		1
2 🗵 🗆 Management, employees knowledge; responsibilities & reporting	3 1.5 0			<b> </b>	×				Water and ice from approved source  Variance obtained for specialized processing	210	쁘	44
responsibilities & reporting    3   ■ Proper use of reporting, restriction & exclusion	3 1.5 0	+		30			×		methods	1 0.5 0		<u> </u>
Good Hygienic Practices .2652, .2653	5 1.9 0	11-11			-	Tem	per	atur	re Control .2653, .2654 Proper cooling methods used; adequate			
4 🗵 🗆 Proper eating, tasting, drinking, or tobacco use	2 1 0				×	Ш			equipment for temperature control	1 0.5 0	쁘	4
5 🛛 No discharge from eyes, nose or mouth	1 0.5 0			32	-			X	Plant food properly cooked for hot holding	1 0.5 0		10
Preventing Contamination by Hands .2652, .2653, .2655, .2656		1-1		33	X				Approved thawing methods used	1 0.5 0		
6 🗵 🗆 Hands clean & properly washed	420			34	X				Thermometers provided & accurate	1 0.5 0		
7 ⊠ □ □ No bare hand contact with RTE foods or preapproved alternate procedure properly followed	3 1.5 0				ood		ntific	catio				
8 🗵 🗆 Handwashing sinks supplied & accessible	2 1 0	+		-	×				Food properly labeled: original container	2 1 0		<u> </u>
Approved Source .2653, .2655					$\overline{}$	ntio	n of	1 100	od Contamination .2652, .2653, .2654, .2656, .2657			
9 🛛 🗆 Food obtained from approved source	210			l	×				animals  Contamination prevented during food	2 1 0		ᆜ
10 🗆 🔻 Food received at proper temperature	210			<b>I</b>	×	Ш			preparation, storage & display	210	쁘	뽀
11 🛛 📗 Food in good condition, safe & unadulterated	210			<b>I</b>	×				Personal cleanliness	1 0.5 0		10
Required records available: shellstock tags,	210			39	×				Wiping cloths: properly used & stored	1 0.5 0		
Protection from Contamination .2653, .2654		1-1		40	×				Washing fruits & vegetables	1 0.5 0		
13 🗷 🗆 🗆 Food separated & protected	3 1.5 0						se of	f Ute	ensils .2653, .2654			
14 🗌 🔀 Food-contact surfaces: cleaned & sanitized	3 1.5			<b> </b>	×				In-use utensils: properly stored	1 0.5 0	Щ	4
Proper disposition of returned, previously served,	210			42	×				Utensils, equipment & linens: properly stored, dried & handled	1 0.5 0		
Potentially Hazardous Food Time/Temperature .2653		1-1		43	×				Single-use & single-service articles: properly stored & used	1 0.5 0		
16   Proper cooking time & temperatures	3 1.5 0			44	×				Gloves used properly	1 0.5 0		
17 🛛 🗆 🗎 Proper reheating procedures for hot holding	3 1.5 0			U	Itens	ils a	nd	Equ	ipment .2653, .2654, .2663			
18  Proper cooling time & temperatures	3 1.5 0			45		X			Equipment, food & non-food contact surfaces approved, cleanable, properly designed,	2 🗶 0		
19 🛛 🖂 🖂 Proper hot holding temperatures	3 1.5 0			16	×	П			constructed, & used Warewashing facilities: installed, maintained, &	1 0.5 0		$\pm$
20 🛛 🗆 🖂 Proper cold holding temperatures	3 1.5 0			47		X			used; test strīps  Non-food contact surfaces clean			#
21  Proper date marking & disposition	3 1.5				hysi		Faci	ilitie				
Time as a nublic health control, precedures 9					X				Hot & cold water available; adequate pressure	2 1 0		面
22 Consumer Advisory .2653	2 🗶 0			l	X	П			Plumbing installed; proper backflow devices	2 1 0	ПГ	朩
Consumer advisory provided for raw or	1 0.5 0		ПΠ	<b>!</b> —	×				Sewage & waste water properly disposed	210		<del>1</del>
Highly Susceptible Populations .2653		1-1,	_ _	i⊢					Toilet facilities: properly constructed, supplied		井	#
24	3 1.5 0			51			Ш		& cleaned Garbage & refuse properly disposed; facilities	1 0.5 0	<u> </u>	4
Chemical .2653, .2657			<u>'</u>	╙	X				maintained	1 0.5 0		40
25   Food additives: approved & properly used	1 0.5 0			53	×				Physical facilities installed, maintained & clean	1 0.5 0		
26	21 🗶			54	X				Meets ventilation & lighting requirements; designated areas used	1 0.5 0		
Conformance with Approved Procedures .2653, .2654, .2658									Total Deductions:	2.5		
27 🗆 🗖 🗷 Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	210								Total Deductions.	_		





Cotob!:					ment Inspection	REPUIL				
Establishment Name: SBARRO'S ITALIAN EATERY 409			Establishment ID: 3034020136							
Location Address: 3320 SILAS CREEK PKWY				☑Inspection ☐Re-Inspection Date: 10/08/2019						
City: WINSTON-SALEM State: NC				Comment Addendum Attached?   Status Code:   A						
	ty: 34 Forsyth		27103		ole taken? Yes No	Category #: II				
	water System: ⊠ Municipal/C Supply: ⊠ Municipal/C	community		Email 1: sbarro409@sbarro.com						
	ittee: SBARRO'S INC	on marity - on-one o		Email 2:						
Telephone: (336) 768-9724			Email 3:							
		7	Temperature (	Observatio	ns					
		<b>Cold Holding</b>	Temperature	e is now 4	1 Degrees or less					
Item spaghett	Location ii walk in cooler	Temp Item 39 ServS	Location Safe Timothy	S. 9/27/23	Temp Item 00	Location Temp				
lettuce	walk in cooler	40			_					
ziti	walk in cooler	41								
peppero	ni make unit	40								
bacon	make unit	40								
ambient	make unit	37								
hot wate	r three comp sink	137			<u> </u>					
quat san	i thee comp sink	300								
	Mininternal situation their m		rvations and C		Actions as stated in sections 8-405.11	at the a forced and a				
C		not have a date on	it and was made	more than 24		te Marking - (PF)- One foods held for longer than 24				
n is	o other effective way to k	eep track of prep on time when the foo	or discard times. F	ood shall be r	marked or otherwise ident	ne are not working. There is tified to indicate the time that d log for foods on time and w				
Person i	n Charge (Print & Sign):	First Timothy	Stickle	Last	1-51:dh Ahannon 1					
		First		Last	11 +	10.4				
Regulato	ory Authority (Print & Sign	): ):	Maloney		Ahanron 7	Vlalorey				
	REHS ID	2826 - Malone	y, Shannon		Verification Required Date	e: / <b>//                                </b>				
ρI	- -HS Contact Phone Numbe	r. (336)703	-3383		•					

S Contact Phone Number: (336) 703 - 3383

North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program DHHS is an equal opportunity employer.

Page 2 of \_\_\_\_\_ Food Establishment Inspection Report, 3/2013



Establishment Name: SBARRO'S ITALIAN EATERY 409 Establishment ID: 3034020136

#### **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.



- 7-201.11 Separation-Storage (P)- Bottle of sanitizer stored above food prep surface. Poisonous or toxic materials shall be stored so they cannot contaminate food, equipment, utensils, linens, and single-service and single-use articles.CDI- sanitizer bottle was placed below food prep surface.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment Replace/ repair all racks in walk in cooler due to rusting of shelves. Repair caulking of three compartment sink to wall. Repair/ replace broken ice cover. Equipment shall be maintained in a state of good repair.
- 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils Additional cleaning needed on shelving for dry storage and rack for clean equipment near three compartment sink. Nonfood contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris.





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