Food Establishment Inspection Report so							core: <u>97.5</u>					
Establishment Name: SEASONS RESTAURANT						Establishment ID: 3034010384						
Location Address: 3333 SILAS CREEK PARKWAY					☐ Re-Inspection							
City: WINSTON SALEM	State: NC Date: Ø 8 / 20 / 20 1 9 Status Code:											
							Ti	me	- In	$\frac{0}{12} \underbrace{0}{9} : \underbrace{5}{5} \underbrace{5}_{\bigcirc} \underbrace{0}_{\text{pm}}^{\text{am}} \text{Time Out: } \underbrace{1}_{2} :$	45°_{∞} am	
Zip: 27103 County: 34 Forsyth						Total Time: 2 hrs 50 minutes Total Time: 2 hrs 50 minutes						
Permittee: <u>NOVANT HEALTH OF THE TRIAD</u>										bry #: IV		
Telephone: (336) 718-5043									Ξ.	stablishment Type: ^{Full-Service Restaurar}		
Wastewater System: X Municipal/Community	On	-Site	e S	syst	ten	n				Risk Factor/Intervention Violations:		
Water Supply: Municipal/Community On-Site Supply						No. of Repeat Risk Factor/Intervention Violations:						
Foodborne Illness Risk Factors and Public Health Interventions Risk factors: Contributing factors that increase the chance of developing foodborne illness.						Good Retail Practices Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals,						
Public Health Interventions: Control measures to prevent foodborne illness or										and physical objects into foods.		
IN OUT NA NO Compliance Status Supervision .2652	OUT CDI R VR			<u>د</u>	IN (Compliance Status 2653, .2655, .2658	OUT CDI R VR		
1 PIC Present; Demonstration-Certification by	2 (28				uvv	Pasteurized eggs used where required		
Image: Constraint of the second sec						X				Water and ice from approved source		
2 X Anagement, employees knowledge; responsibilities & reporting	3 1.5 (_			Variance obtained for specialized processing		
3 X D Proper use of reporting, restriction & exclusion	3 1.5 (30				. t	methods		
Good Hygienic Practices .2652, .2653				_	31			iper	atur	re Control .2653, .2654 Proper cooling methods used; adequate		
4 🛛 🗌 Proper eating, tasting, drinking, or tobacco use	210						_		5.7	equipment for temperature control		
5 🛛 🗌 No discharge from eyes, nose or mouth	1 0.5 (32			_		Plant food properly cooked for hot holding		
Preventing Contamination by Hands .2652, .2653, .2655, .2656					33				X	Approved thawing methods used		
6 🖾 🗆 Hands clean & properly washed	420	0 🗆				X				Thermometers provided & accurate	1050	
7 D X No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1.5 (0 🗆				l boc	lden	tific	atic			
8 🛛 🗌 Handwashing sinks supplied & accessible	210							n of	Ear	Food properly labeled: original container od Contamination .2652, .2653, .2654, .2656, .2		
Approved Source .2653, .2655									FU	Insects & rodents not present; no unauthorized		
9 Image: Second contraction of the secon	21	0 🗆				X				animals Contamination prevented during food		
10 🗆 🔲 🔀 Food received at proper temperature	21(preparation, storage & display		
11 🛛 🗌 Food in good condition, safe & unadulterated	210				\vdash	_				Personal cleanliness		
12 Required records available: shellstock tags, parasite destruction	21(\vdash	×	Ц			Wiping cloths: properly used & stored		
Protection from Contamination .2653, .2654						X				Washing fruits & vegetables		
13 🖾 🔲 🖂 Food separated & protected	3 1.5 (_	se of	f Ute	ensils .2653, .2654		
14 🗌 🔀 Food-contact surfaces: cleaned & sanitized	3 🗙 (In-use utensils: properly stored		
15 🖾 🗆 Proper disposition of returned, previously served, reconditioned, & unsafe food	21(42	X				Utensils, equipment & linens: properly stored, dried & handled	1 0.5 0 🗆 🗆	
Potentially Hazardous Food Time/Temperature .2653					43	X				Single-use & single-service articles: properly stored & used	10.50	
16 🛛 🗆	3 1.5 (44	X				Gloves used properly	1050 🗆 🗆	
17 🔲 🔲 🔀 Proper reheating procedures for hot holding	3 1.5 (0			Ut	tensi	ils a	Ind I	Equ	ipment .2653, .2654, .2663		
18 Image: Second state of the	3 1.5	K X			45		×			Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	21 X	
19 🛛 🗌 🔲 Proper hot holding temperatures	3 1.5 (46	\boxtimes				Warewashing facilities: installed, maintained, & used; test strips		
20 🛛 🗀 🗀 Proper cold holding temperatures	3 1.5 (47	×				Non-food contact surfaces clean	1050	
21 🛛 🗌 🔲 Proper date marking & disposition	3 1.5 (Pł	hysio	cal F	Faci	litie	s .2654, .2655, .2656		
22 D X X Time as a public health control: procedures & records	210				48	\mathbf{X}				Hot & cold water available; adequate pressure	210	
Consumer Advisory .2653					49	X				Plumbing installed; proper backflow devices	210	
23 Consumer advisory provided for raw or undercooked foods	1 0.5 (50	X				Sewage & waste water properly disposed		
Highly Susceptible Populations .2653		_			51	X				Toilet facilities: properly constructed, supplied		
24 Image: Second structure Pasteurized foods used; prohibited foods not offered	3 1.5 (52			_		& cleaned Garbage & refuse properly disposed; facilities		
Chemical .2653, .2657										maintained		
25 C Food additives: approved & properly used					53					Physical facilities installed, maintained & clean Meets ventilation & lighting requirements;		
26 X Toxic substances properly identified stored, & used	21				54	X	IJ			designated areas used		
Conformance with Approved Procedures .2653, .2654, .2658 27 Image: Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	210									Total Deduction:	s: 2.5	

applys

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

Comment Addendum to Food Establishment Inspection Report

Establishment Name: <u>SEASONS RESTAURANT</u>		Establishment ID: 3034010384						
Location Address: <u>3333 SILAS CREEK PARKWAY</u> City: <u>WINSTON SALEM</u> County: <u>34 Forsyth</u> Zip: <u>2710</u> Wastewater System: X Municipal/Community On-Site System Water Supply: X Municipal/Community On-Site System Permittee: <u>NOVANT HEALTH OF THE TRIAD</u> Telephone: <u>(336) 718-5043</u>	m	☑ Inspection □ Re-Inspection Date: <u>08/20/2019</u> Comment Addendum Attached? □ Status Code: A Water sample taken? □ Yes ☑ No Category #: IV Email 1: ^{ryansmith@lammorrison.com} Email 2: Email 3:						
Temperature Observations								
Cold Holding Temperature is now 41 Degrees or less								

ltem Ryan Smith	Location 4/3/23	Temp 0	ltem salsa	Location southwest station	Temp 41	Item wings	Location final cook	Temp 193
Hot water	two comp sink	156	veggies	southwest station	148	taco meat	reach in	37
sanitizer (cl)	dish machine (ppm)	100	queso	southwest station	152	chicken salad	display cooler	40
tomato	hot dog station	41	beef barbacoa	southwest station	151	tuna salad	display cooler	40
hot dogs	hot dog station high	152	rice	southwest station	146	pizza	hot hold	148
hot dogs	hot dog station low	138	beans	southwest station	158	flat bread	hot hold	139
chili	hot dog station	172	ham	deli	40	lentil soup	hot hold	185
chicken	hot box	167	turkey	deli	40	chicken	hot hold	192

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.

14 4-602.11 Equipment Food-Contact Surfaces and Utensils-Frequency - P Two soda nozzles with minor debris build up. Back of slicer blade and flat food slide had dried food debris, employee stated slicer was used day prior. Chip warmer bin had chip and grease accumulation on internal components. Food contact surfaces shall be kept clean to sight and touch. CDI: Noted items cleaned and sanitized during inspection.

- 3-501.14 Cooling P Two pans of black beans in walk in cooler at 117 121F at 10:10am. PIC stated beans had been in cooler for 1 hour. At 11:19 beans were checked, top pan in line with compressor fans was at 69-70F bottom pan below direct fan was at 96 -101F. Potentially hazardous foods must be cooled rapidly going from 135 - 70F within two hours. Pan of beans discarded by PIC. Air temperature of cooler was 42F, PIC contacted repair staff to evaluate cooler and make repairs to be able to cool foods to 41F and lower. 0 pts
- 30 8-103.11 Documentation of Proposed Variance and Justification PF Establishment has two compartment sink for warewashing supplemental to the dish machine. Establishments using a two compartment sink must obtain a variance for its use or have approved by the local health department the use of; a detergent sanitizer combination chemical, or hot water immersion sanitizing equipment. Variance has been received by the variance committee at this time. Establishment shall contact Joseph Chrobak at (336) 703-3164 or Chrobajb@forsyth.cc if any changes or updates occur with variance approval process.

Lock

Text								
Person in Charge (Print & Sign):	Marco	First	Aponte	Last	Mat			
Regulatory Authority (Print & Sign)	Joseph :	First	Chrobak	Last	for			
REHS ID: 2450 - Chrobak, Joseph Verification Required Date: 08 / 30 / 2019								
REHS Contact Phone Number: (336) 703 - 3164 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 <u>3</u> Food Establishment Inspection Report, 3/2013								

Spell

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Observations and Corrective Actions

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- 4-301.11 Cooling, Heating, and Holding Capacities-Equipment PF Walk in cooler is holding with an air temperature of 42F at the coldest portion of the unit. Foods cooling in the walk in did not meet cooling parameters due to temperatures not being low enough. To be used for storing potentially hazardous foods at or below 41F and for cooling foods the walk in cooler must be repaired to get adequately cold enough to drop internal food temperatures to or below 41F. Repair the walk in cooler and contact Joseph Chrobak at (336) 703-3164 or Chrobajb@forsyth.cc for verification no later than 8/30/19. Until repair and verification is complete store and cool potentially hazardous foods in upright coolers and use rapid cooling methods such as ice baths and ice wands to supplement cooling in the coolers.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment C Small crack present on front right corner of the left basin at the two compartment sink. Equipment shall be kept in good repair. Have crack welded and sanded smooth by an ANSI approved welder. 0 pts





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