

# Food Establishment Inspection Report

Score: 95

Establishment Name: WENDY'S #1926

Establishment ID: 3034012745

Location Address: 2218 CLOVERDALE AVE.

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 04/14/2021

Status Code: U

Zip: 27103

County: 34 Forsyth

Time In: 2:25 PM

Time Out: 4:45 PM

Permittee: SUPERIOR RESTAURANT GROUP OF NORTH CAROLINA INC

Total Time: 2 hrs 20 min

Telephone: (609) 731-0035

Category #: 11

Wastewater System: ☒ Municipal/Community ☐ On-Site System

FDA Establishment Type:

Water Supply: ☒ Municipal/Community ☐ On-Site Supply

No. of Risk Factor/Intervention Violations: 1

No. of Repeat Risk Factor/Intervention Violations: 0

Foodborne Illness Risk Factors and Public Health Interventions										Good Retail Practices										
Risk factors: Contributing factors that increase the chance of developing foodborne illness. Public Health Interventions: Control measures to prevent foodborne illness or injury.										Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.										
IN	OUT	N/A	N/C	Compliance Status	OUT	CDI	R	VR		IN	OUT	N/A	N/C	Compliance Status	OUT	CDI	R	VR		
<b>Supervision</b> .2652										<b>Safe Food and Water</b> .2653, .2655, .2658										
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	0				28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required	1	0				
<b>Employee Health</b> .2652										<b>Food Temperature Control</b> .2653, .2654										
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	1	0			29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1	0			
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	1	0			30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	1	0				
<b>Good Hygienic Practices</b> .2652, .2653										<b>Food Identification</b> .2653										
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	1	0			31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	1	0				
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	0				32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	0				
<b>Preventing Contamination by Hands</b> .2652, .2653, .2655, .2656										<b>Prevention of Food Contamination</b> .2652, .2653, .2654, .2656, .2657										
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	4	2	0			33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	1	0				
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	3	1	0			34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	0				
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	1	0			<b>Proper Use of Utensils</b> .2653, .2654										
<b>Approved Source</b> .2653, .2655										<b>Utensils and Equipment</b> .2653, .2654, .2663										
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1	0			41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	0				
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	1	0			42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	0				
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated	2	1	0			43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	0				
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	1	0			44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	0				
<b>Protection from Contamination</b> .2653, .2654										<b>Physical Facilities</b> .2654, .2655, .2656										
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	1	0			45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2	1	0			
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	1	0			46	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	0				
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1	0			47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	0				
<b>Potentially Hazardous Food Time/Temperature</b> .2653										<b>Conformance with Approved Procedures</b> .2653, .2654, .2658										
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures	3	1	0			27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	2	1	0			
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	1	0			<b>Total Deductions:</b> 5										
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures	3	1	0													
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	1	0													
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	1	0													
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	1	0													
22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Time as a public health control: procedures & records	2	1	0													
<b>Consumer Advisory</b> .2653																				
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	0														
<b>Highly Susceptible Populations</b> .2653																				
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	1	0													
<b>Chemical</b> .2653, .2657																				
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	1	0														
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	1	0													



North Carolina Department of Health & Human Services

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Food Establishment Inspection Report, 3/2013



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: WENDY'S #1926  
 Location Address: 2218 CLOVERDALE AVE.  
 City: WINSTON SALEM State: NC  
 County: 34 Forsyth Zip: 27103  
 Wastewater System: ☒ Municipal/Community ☐ On-Site System  
 Water Supply: ☒ Municipal/Community ☐ On-Site System  
 Permittee: SUPERIOR RESTAURANT GROUP OF NORTH  
 Telephone: (609) 731-0035

Establishment ID: 3034012745  
☒ Inspection ☐ Re-Inspection Date: 04/14/2021  
 Comment Addendum Attached? ☒ Status Code: U  
 Water sample taken? ☐ Yes ☒ No Category #: II  
 Email 1: alan@superiorrestaurant.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
Grilled Chicken	final cook	199						
Burger	final cook	178						
Queso	hot holding	138						
Lettuce	sandwich line	40						
Tomatoes	sandwich line	39						
Salad	reach-in cooler	41						
Salad	upright reach-in cooler	41						
Tomatoes	sandwich line 2	40						
Lettuce	sandwich line 2	41						
Chili Meat	walk-in cooler	40						
Tomatoes	walk-in cooler	40						
Hot Water	3-compartment sink	138						
Quat Sani	3-compartment sink	300						
Serv Safe	Juanita Rucker 11/16/21	000						

Person in Charge (Print & Sign): Juanita Rucker  
 Regulatory Authority (Print & Sign): Victoria Murphy



REHS ID: 2795 - Murphy, Victoria

Verification Required Date:

REHS Contact Phone Number: (336) 703-3814



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## 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 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P: Six pans were stored soiled in the clean dish area. Food-contact surfaces shall be clean to sight and touch. CDI: PIC placed items in warewashing area to be cleaned.
  
- 36 6-202.15 Outer Openings, Protected - C: The self-closing portions of the drive-thru window is no longer self-closing. Outer openings of a food establishment shall be protected against the entry of insects and rodents.//6-501.111 Controlling Pests - C: Flies observed in the kitchen area. The premises shall be maintained free of insects, rodents, and other pest.
  
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C: No noncompliant items have been replaced/repared from the transitional walk-thru list. Refer to comment addendum given during the transitional walk-through. All items must be completed by 9/20/21
  
- 46 4-501.19 Manual Warewashing Equipment, Wash Solution Temperature - PF: The temperature of the wash solution measured at 89 F. The temperature of the wash solution in manual warewashing equipment shall be maintained at not less than 110 F or the temperature specified on the cleaning agent manufacturer's label instructions. CDI: PIC produced a solution of 114 F
  
- 47 4-602.13 Nonfood Contact Surfaces - C: Cleaning is needed to/on the following: microwave, cooler gaskets, shelves in walk-in cooler, outside of equipment. Nonfood-contact surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues.
  
- 52 5-501.113 Covering Receptacles - C: Door of outside recyclable open/Door of outdoor receptacle open. Receptacles and waste handling units for refuse, recyclables, and returnables shall be kept covered.
  
- 53 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C: No noncompliant items have been replaced/repared from the transitional walk-thru list. Refer to comment addendum given during the transitional walk-through. All items must be completed by 9/20/21
  
- 54 6-303.11 Intensity-Lighting - C: No noncompliant items have been replaced/repared from the transitional walk-thru list. Refer to comment addendum given during the transitional walk-through. All items must be completed by 9/20/21