 (-ood Establishment Inspection Report Score: 98.5																			
Es	tab	lis	hn	ner	nt Name: SIMPLY SOUTHERN CUISINE							_ E	st	ablishment ID: 3034020582					_	
					ress: 3570-C CLEMMONS RD									X Inspection ☐ Re-Inspection						
Cit	v:	CL	EM	МО	NS	State:	. N	C			Da	ate	: 0	0 4 / 1 6 / 2 0 2 1 Status Code: A						
	_					Jidio.			Time In: <u>Ø 2</u> : <u>1 5 ⊗ pm</u> Time Out: <u>Ø 4</u> : <u>Ø Ø ⊗ pm</u>											
	Zip: 27012 County: 34 Forsyth									Total Time: 1 hr 45 minutes										
	Permittee: HAMPTON SQUARE CATERING & TAKE										Category #: IV									
	elephone: (336) 712-4636										EDA Fotoblishment Type: Full-Service Restaurant									
Na	ast	ew	ate	er S	System: 🛛 Municipal/Community 🛭	On-	Site	Sys	tem No. of Risk Factor/Intervention Violations: 1											
Na	ate	r S	up	ply	y: ⊠Municipal/Community □ On-	Site S	upp	ly						Repeat Risk Factor/Intervention Violations		s:	_	_		
Foodborne Illness Risk Factors and Public Health Interventions										Good Retail Practices										
					ibuting factors that increase the chance of developing foodb ventions: Control measures to prevent foodborne illness or					Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.										
i		_	N/A		Compliance Status	OUT	CDI	R VR		IN	оит	N/A	N/O		OUT	\exists	CDI	R V	 /R	
S	uper	_		,0	.2652	00.	102.1		Sa					ater .2653, .2655, .2658	00.		55.	X J.		
1	X				PIC Present; Demonstration-Certification by accredited program and perform duties	2 0			28			X		Pasteurized eggs used where required	1 0.5	0][
$\overline{}$	mplo	ye	е Не	alth	.2652				29	X				Water and ice from approved source	21	0		<u> </u>	$\overline{\Box}$	
2	X				Management, employees knowledge; responsibilities & reporting	3 1.5 0			30	П		×		Variance obtained for specialized processing methods	1 0.5	0	Пİ	寸	-	
3	X				Proper use of reporting, restriction & exclusion	3 1.5 0			\perp				atur	re Control .2653, .2654						
$\overline{}$	$\overline{}$		gien	ic Pr	ractices .2652, .2653				31	-				Proper cooling methods used; adequate equipment for temperature control	1 0.5	0] [
-	-				Proper eating, tasting, drinking, or tobacco use	2 1 0	+		32				X	Plant food properly cooked for hot holding	1 0.5	0		址	\overline{a}	
_	\boxtimes				No discharge from eyes, nose or mouth	1 0.5 0			33			П	\mathbf{x}	Approved thawing methods used	1 0.5	\vdash	-	-	Ξ	
$\overline{}$			g Co	onta	mination by Hands .2652, .2653, .2655, .2656				\vdash	\mathbf{X}		_	_	Thermometers provided & accurate	1 0.5	H	_	7	\exists	
\rightarrow	=				Hands clean & properly washed No bare hand contact with RTE foods or pre-	420	-		\perp	ood l	$\underline{}$	tific	atio	•		۲		-1-		
-	=+			Ш	approved alternate procedure properly followed	3 1.5 0		44	35					Food properly labeled: original container	21	0		T	Ī	
_	×				Handwashing sinks supplied & accessible	210			Pr	eve	ntio	n of	Foo	od Contamination .2652, .2653, .2654, .2656, .265	7					
\neg	-		l So	urce					36	X				Insects & rodents not present; no unauthorized animals	21	0		٦þ		
\dashv	=				Food obtained from approved source	210	\vdash	111	37	X				Contamination prevented during food preparation, storage & display	2 1	0		3		
\dashv	=			X	Food received at proper temperature	210	+		38		X			Personal cleanliness	1 0.5	X		٦Ē	<u> </u>	
11	X				Food in good condition, safe & unadulterated	210			39					Wiping cloths: properly used & stored	 	Н	+	⇟	$\overline{}$	
			X		Required records available: shellstock tags, parasite destruction	210			40	_		П		Washing fruits & vegetables	1 0.5	\vdash	_	#	=	
$\overline{}$	_	$\overline{}$			Contamination .2653, .2654				\perp				Ute	ensils .2653, .2654		۲		-1-		
13	-		Ш	Ш	Food separated & protected	3 1.5 0								In-use utensils: properly stored	1 0.5	0		T	Ī	
14	-+	Ц			Food-contact surfaces: cleaned & sanitized Proper disposition of returned, previously served,	3 1.5 0	Ш	44	42		×			Utensils, equipment & linens: properly stored, dried & handled	1 0.5	\vdash	-	7	_	
15					reconditioned, & unsafe food	210			43					Single-use & single-service articles: properly stored & used	1 0.5	\vdash	-	7	_	
	oten	tiall			dous Food Time/Temperature .2653	3 1.5 0		-11-	\vdash	_	-							#	_	
16] [X	Proper cooking time & temperatures				44		IIc a	nd I	Eau	Gloves used properly	1 0.5	0	ᆜ			
17	Ц	Ш		×	Proper reheating procedures for hot holding	3 1.5 0		4	П			iiu i	≟qu	ipment .2653, .2654, .2663 Equipment, food & non-food contact surfaces approved, cleanable, properly designed,				Ţ	_	
\dashv	×				Proper cooling time & temperatures	3 1.5 0			\vdash	X				constructed, & used Warewashing facilities: installed, maintained, &	21			1		
19 20	□ ⊠			X	Proper hot holding temperatures Proper cold holding temperatures	3 1.5 0	-		46					used; test strips	1 0.5	\vdash	_	#	_ _	
\dashv	\rightarrow								\perp	Nysio		- noi	litio	Non-food contact surfaces clean	1 0.5	0	ᆜ	╩	_	
21		X			Proper date marking & disposition Time as a public health control: procedures &	3 🗙 0	X					aci	iitie	s .2654, .2655, .2656 Hot & cold water available; adequate pressure	2 1	О		7	_	
22	Щ	Ш	X	L.	records	210			49					Plumbing installed; proper backflow devices	21	\equiv		╬	=	
23	onsi	ıme	Er Ac	dviso	Consumer advisory provided for raw or	1 0.5 0			\vdash		-							#	_	
	iahly	/ Su		ntib	undercooked foods le Populations .2653			71-	50					Sewage & waste water properly disposed Toilet facilities: properly constructed, supplied	21			#	_	
24			X		Pasteurized foods used; prohibited foods not offered	3 1.5 0			51		Ц			& cleaned	1 0.5	0	4	4	ᆜ	
\neg	hem	ical			.2653, .2657				52					Garbage & refuse properly disposed; facilities maintained		0	_	1	<u> </u>	
25			X		Food additives: approved & properly used	1 0.5 0			53					Physical facilities installed, maintained & clean	1 0.5	\Box	-	4	_	
_	×				Toxic substances properly identified stored, & used	210			54		X			Meets ventilation & lighting requirements; designated areas used	1 0.5	X		×		
С	onfo	rma		wit	h Approved Procedures .2653, .2654, .2658			1.						Total Deductions:	1.5					
27	$\sqcup $	Ш	X		Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	2 1 0								Total Deductions.						



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	Comment	<u>Adde</u> r	ndum to	Food Es	<u>tablish</u> n	<u>nent Ir</u>	spection	Report				
stablishme	nt Name: SIMPLY SOUT	HERN CL	JISINE		Establishment ID: 3034020582							
Location A	ddress: 3570-C CLEMMO MONS	NS RD	Sta	te: NC	☐ Inspection ☐ Re-Inspection ☐ Date: 04/16/2021 Comment Addendum Attached? ☐ Status Code: A							
County: 34			Zip: 27012		Water sample		Category #: IV					
	System: ☒ Municipal/Commu				Email 1: m)	_simply_s	outhern@yahoo.d					
Water Supply	/: Municipal/Commu HAMPTON SQUARE CA	, _	,		Email 2:							
	(336) 712-4636		· · · · · · · · · · · · · · · · · · ·		Email 3:							
Тегерпопе	. (***)		Temne	rature Oh	servation	<u> </u>						
	Col	d Hale	•				oe or loce					
ltem chicken	Location cooling (since 2PM)	Temp 1		Location	13 110W 41	Temp I	ees or less tem L	ocation	Temp			
chicken	cooling (1 hour later)	62										
green beans	upright cooler	39										
green beans	cooling (since 12PM)	61										
pimiento	retail cooler	38										
hot water	3-compartment sink	145										
chlorine (ppm)	3-compartment sink	100										
ServSafe	Kory Miller 11-7-24	0										
21 3-501.1 cheese from pr marked	iolations cited in this report 7 Ready-To-Eat Potent marked with use by dat eparation with day 1 bei I with a discard date of 4 1 Effectiveness-Hair Re r hair net. 0 pts.	ially Haza e of Aug ng the da I-20 since	ardous Food ust 6th. Since ate the oldest e it was made	(Time/Temp e pimiento cl t TCS ready- e 2 days ago	erature Cont neese is prep to-eat food v	rol for Sa pared in e vas open	fety Food), Dat establishment it ed or cooked. C	e Marking - F must be disc CDI - Pimiento	PF - Pimiento arded 7 days o cheese date			
	1 Equipment and Utens s shall be air dried. Do r							ans were still	wet to touch.			
Lock Text												
Person in Char	rge (Print & Sign): Kory			Miller	nst not	jes			\sim			
Regulatory Au	thority (Print & Sign): ^{And}	Firs rew). 	Lee	est		Lu	LEO	15			
	REHS ID: 25	544 - Lee	e, Andrew			_ Verificati	on Required Date	e: /	/			
	ontact Phone Number: (Health ● Enviror	nmental Hea	lth Section ● Food	Protection Progr	ram 🔊			

Establishment Name: SIMPLY SOUTHERN CUISINE Establishment ID: 3034020582

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.



6-303.11 Intensity-Lighting - C - Repeat - Lighting low in restroom (6-10 foot candles). Lighting shall be at least 20 foot candles at plumbing fixtures in restrooms. 0 pts.





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Observations and Corrective Actions

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Observations and Corrective Actions

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