

Food Establishment Inspection Report

Score: 100

Establishment Name: HUNGRY HOWIES PIZZA

Establishment ID: 3034012792

Location Address: 3914 COUNTRY CLUB ROAD
 City: WINSTON SALEM State: North Carolina
 Zip: 27104 County: 34 Forsyth
 Permittee: MUNCIE ENTERPRISES LLC
 Telephone: (336) 768-9000

Date: 01/10/2022 Status Code: A
 Time In: 1:28 PM Time Out: 2:34 PM
 Category#: II
 FDA Establishment Type: _____

Inspection Re-Inspection
Wastewater System:
 Municipal/Community On-Site System
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										
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					
Supervision .2652										
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		
Employee Health .2652										
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	
Good Hygienic Practices .2652, .2653										
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	
Preventing Contamination by Hands .2652, .2653, .2655, .2656										
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	
Approved Source .2653, .2655										
11	<input checked="" type="checkbox"/>	OUT				Food obtained from approved source	2	1	0	
12	<input checked="" type="checkbox"/>	IN/OUT	<input checked="" type="checkbox"/>			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	<input checked="" type="checkbox"/>	N/O		Required records available: shellstock tags, parasite destruction	2	1	0	
Protection from Contamination .2653, .2654										
15	<input checked="" type="checkbox"/>	OUT/N/A/N/O				Food separated & protected	3	1.5	0	
16	<input checked="" type="checkbox"/>	OUT				Food-contact surfaces: cleaned & sanitized	3	1.5	0	
17	<input checked="" type="checkbox"/>	OUT				Proper disposition of returned, previously served, reconditioned & unsafe food	2	1	0	
Potentially Hazardous Food Time/Temperature .2653										
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"/>	IN/OUT/N/A/N/O	<input checked="" type="checkbox"/>			Proper cooling time & temperatures	3	1.5	0	
21	<input checked="" type="checkbox"/>	IN/OUT/N/A/N/O	<input checked="" type="checkbox"/>			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"/>	IN/OUT/N/A/N/O				Proper date marking & disposition	3	1.5	X	X
24	<input checked="" type="checkbox"/>	IN/OUT	<input checked="" type="checkbox"/>	N/O		Time as a Public Health Control; procedures & records	3	1.5	0	
Consumer Advisory .2653										
25	<input checked="" type="checkbox"/>	IN/OUT	<input checked="" type="checkbox"/>			Consumer advisory provided for raw/undercooked foods	1	0.5	0	
Highly Susceptible Populations .2653										
26	<input checked="" type="checkbox"/>	IN/OUT	<input checked="" type="checkbox"/>			Pasteurized foods used; prohibited foods not offered	3	1.5	0	
Chemical .2653, .2657										
27	<input checked="" type="checkbox"/>	IN/OUT	<input checked="" type="checkbox"/>			Food additives: approved & properly used	1	0.5	0	
28	<input checked="" type="checkbox"/>	OUT/N/A				Toxic substances properly identified stored & used	2	1	0	
Conformance with Approved Procedures .2653, .2654, .2658										
29	<input checked="" type="checkbox"/>	IN/OUT	<input checked="" type="checkbox"/>			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					
Safe Food and Water .2653, .2655, .2658										
30	<input checked="" type="checkbox"/>	IN/OUT	<input checked="" type="checkbox"/>			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	<input checked="" type="checkbox"/>			Variance obtained for specialized processing methods	2	1	0	
Food Temperature Control .2653, .2654										
33	<input checked="" type="checkbox"/>	OUT				Proper cooling methods used; adequate equipment for temperature control	1	0.5	0	
34	<input checked="" type="checkbox"/>	IN/OUT	<input checked="" type="checkbox"/>	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	
Food Identification .2653										
37	<input checked="" type="checkbox"/>	OUT				Food properly labeled: original container	2	1	0	
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657										
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"/>	OUT				Personal cleanliness	1	0.5	0	
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	
Proper Use of Utensils .2653, .2654										
43	<input checked="" type="checkbox"/>	OUT				In-use utensils: properly stored	1	0.5	0	
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	
Utensils and Equipment .2653, .2654, .2663										
47	<input checked="" type="checkbox"/>	OUT				Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	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"/>	IN/OUT	<input checked="" type="checkbox"/>			Non-food contact surfaces clean	1	0.5	X	
Physical Facilities .2654, .2655, .2656										
50	<input checked="" type="checkbox"/>	OUT/N/A				Hot & cold water available; adequate pressure	1	0.5	0	
51	<input checked="" type="checkbox"/>	IN/OUT	<input checked="" type="checkbox"/>			Plumbing installed; proper backflow devices	2	1	X	
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"/>	OUT				Physical facilities installed, maintained & clean	1	0.5	0	
56	<input checked="" type="checkbox"/>	OUT				Meets ventilation & lighting requirements; designated areas used	1	0.5	0	
TOTAL DEDUCTIONS:							0			



Comment Addendum to Food Establishment Inspection Report

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 Water Supply: Municipal/Community On-Site System
 Permittee: MUNCIE ENTERPRISES LLC
 Telephone: (336) 768-9000

Establishment ID: 3034012792
 Inspection Re-Inspection Date: 01/10/2022
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: II
 Email 1:
 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
ServSafe	Kathryn Harris 10/6/26	00						
hot water	3 compartment sink	135						
quat sanitizer	3 compartment sink	200						
sliced tomatoes	salad MU	39						
feta cheese	salad MU	40						
ham	salad MU	39						
chopped lettuce	salad MU	38						
chicken	salad MU	38						
chicken wings	wing MU	39						
shredded chicken	wing MU	38						
turkey	wing MU	39						
shredded beef	wing MU	38						
chicken	walk in cooler	40						
ham	walk in cooler	40						
pepperoni	walk in cooler	40						
pizza	final cook	174						
wings	commercial reheat	142						

Person in Charge (Print & Sign): Kathryn *First* Harris *Last*
 Regulatory Authority (Print & Sign): Jackie *First* Martinez *Last*


 Jackie Martinez: REHSE

REHS ID: 3003 - Martinez, Jackie Verification Required Date: _____

REHS Contact Phone Number: (336) 703-3137



North Carolina Department of Health & Human Services

● Division of Public Health ● Environmental Health Section ● Food Protection Program
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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.

- 23 3-501.18 Ready-To-Eat Time / Temperature Control for Safety Food, Disposition-P- Two containers of shredded beef were out of date in walk in cooler (1/1 & 1/4). Discard the food requiring date labels once time/temperature window has expired, if it has not been labeled, or if the label is incorrect. CDI- Beef was voluntarily discarded.

- 49 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils-C- Clean entire dry storage shelf. Nonfood contact surfaces shall be maintained free of an accumulation of dust, dirt, & debris.

- 51 5-205.15 (B) Plumbing System in Good Repair- C- Cold water handle at handsink is broken. Maintain plumbing systems in good repair and proper adjustment. Repair faucet handle so that it functions as intended. Management stated handle is in process of being repaired.