Food Establishment Inspection Report

Establishment Name: LO	UIE AND HONEY KITCHEN	Establishment ID: 3034012718							
Location Address: 401 WEST END BLVD. City: WINSTON SALEM State: North Carolina Zip: 27101 County: 34 Forsyth Permittee: LAVENDAR AND HONEY KITCHEN, LLC Telephone: (336) 416-2658		Date: 03/22/2023 Time In: 1:30 PM Category#: IV FDA Establishment Type	Status Code: A Time Out:3:05 PM						
Inspection	○ Re-Inspection	1 DA Establishment Type.							
Wastewater System:		No. of Risk Factor/Intervention Violations: 0 No. of Repeat Risk Factor/Intervention Violations:							
Municipal/Community	On-Site Supply								

				icipal/Community On-Site Supply	/										•						_	_
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								Good Retail Practices Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.														
(Com	nplia	nce	e Status	C	DUT	CDI	R	VR	2	Со	m	oliar	nce	e Status			OU.	Г	CDI	R١	۷
Supervision .2652					1	Safe Food and Water .2653, .2655, .2658																
1	iχο	UT N/A		PIC Present, demonstrates knowledge, & performs duties	1	0)				30 IN				Pasteurized eggs used			0.5			\Box	
,	Жo	UT N/A	\forall	Certified Food Protection Manager	1	0			+	┪	31 jx	(OI	JΤ	\vdash	Water and ice from appr		2	1	0		+	_
Employee Health 2652 Variance obtained for specialized process methods										ecialized processing	2	1	0									
3	TΤ			Management, food & conditional employee; 2 1 0 Food Temperature Control .2653, .2654																		
4	iχο	UT		Proper use of reporting, restriction & exclusion	3	1.5 0)] [33)	(01	JT		Proper cooling methods		L					
5	iΧo	UT		Procedures for responding to vomiting & diarrheal events	1	0.5)				34 IN			. Mo	equipment for temperate Plant food properly cool		_	0.5	ш		+	_
(Good	Hvaier	nic P	Practices .2652, .2653			_				35 IX							0.5			+	_
	i)(o			Proper eating, tasting, drinking or tobacco use	1	0.5)	Π	Τ		36)				Thermometers provided		_	0.5	-		+	_
7	Ж	UT	П	No discharge from eyes, nose, and mouth	1	0.5)		Food Identification .2653													
			Cont	amination by Hands .2652, .2653, .2655, .26							37 j)x	(01	JT	Π	Food properly labeled: o	original container	2	1	0		\Box	_
8	Xo		Н	Hands clean & properly washed No bare hand contact with RTE foods or pre-	4	2 (+		+	-	Prev	vent	ion o	f Fo	ood Contamination	2652, .2653, .2654, .2656, .26	57					
9		OUT N/A	N/O	approved alternate procedure properly followed	4	2 0					38 🕽	ίοι	JT		Insects & rodents not pranimals	esent; no unauthorized	2	1	0		Т	_
		ved S	ourc	Handwashing sinks supplied & accessible e .2653, .2655	2	1 0	'				39 X	ίοι	JT		Contamination prevente		2	,	0		\top	_
)X(o			Food obtained from approved source		1 (7 I	40 X			\vdash	preparation, storage & of Personal cleanliness	iispiay	1	0.5	ш		+	_
	! IN O		₩	Food received at proper temperature		1 (_			1 :	41 X	`	_		Wiping cloths: properly	used & stored	1	0.5	_		+	-
13)X(o	UT		Food in good condition, safe & unadulterated	2	1 0)		-	1 :	42 X	`	_		Washing fruits & vegeta		1	-	0		+	_
14	IN O	Required records available: shellstock tags, parasite destruction 2 1 0 Proper Use of Utensils .2653, .2654										-			Ī							
Protection from Contamination .2653, .2654									43 X				In-use utensils: properly	-	1	0.5	0		Т	-		
15	i)(o	UT N/A	N/O	Food separated & protected	3	1.5 0		Π	Т	1	44 X	í	IT		Utensils, equipment & li	nens: properly stored,			П		\top	_
16)X(o	UT		Food-contact surfaces: cleaned & sanitized	3	1.5)] [_	dried & handled		1	0.5	0		\perp	_
17	×Ι	UT		Proper disposition of returned, previously served, reconditioned & unsafe food	2	1 0)				45 X	(01	JΤ		Single-use & single-serv stored & used	rice articles: properly	1	0.5	0			
				rdous Food Time/Temperature .2653	1-1			_	_		46 X	(OI	JT		Gloves used properly		1	0.5	0		工	
	18 IN OUT NA NO Proper cooking time & temperatures 3 1.5 0 19 IN OUT NA NO Proper reheating procedures for hot holding 3 1.5 0						-	Uter	nsil	and	Εqι	uipment .2	653, .2654, .2663									
				Proper cooling time & temperatures	\rightarrow	1.5 0			+	-		Ι.			Equipment, food & non-						\mathcal{J}	
21	IN O	UT N/A	N/O	Proper hot holding temperatures	-	1.5				1	47 IN	9	₹		approved, cleanable, processing constructed & used	operly designed,	1	0%	0	-	X	
				Proper cold holding temperatures	\rightarrow	1.5 0]	+	+	+	\vdash	Warewashing facilities:	netalled maintained &	+		Н		+	-
\vdash	++	OUT N/A	-	Proper date marking & disposition Time as a Public Health Control; procedures &	+	1.5 0	+			7	48 X				used; test strips		1	0.5	Ш		\perp	
\vdash	\perp		Ш	records	3	1.5	<u>'</u>			4	49 X	-			Non-food contact surface		1	0.5	0		ㅗ	_
(onsu	ımer A	dvis	Company of the control of the control			_		_	-	-		I Fac			654, .2655, .2656					_	
25	IN O	UT NA		Consumer advisory provided for raw/ undercooked foods	1	0.5)				50 JX	i ou	JT N/A	-	Hot & cold water available Plumbing installed; prop		2	0.5	0		+	_
ŀ	lighly	Susc	eptik	ole Populations .2653							52 X	(01	JT		Sewage & wastewater p		2	1	0		\pm	_
26	in o	ит у ⁄⁄		Pasteurized foods used; prohibited foods not offered	3	1.5)				53 X	(OI	JT N/A		Toilet facilities: properly & cleaned	constructed, supplied	1	0.5	0		T	
	Chemi			.2653, .2657							54 X	ίοι	JT		Garbage & refuse prope	rly disposed; facilities	_				\top	_
		UT N/A		Food additives: approved & properly used	\rightarrow	0.5	_			1 [1	maintained Physical facilities install	ad maintained & class	1	0.5			+	_
		UT N/A	_	Toxic substances properly identified stored & used	2	1 0)			- 1	55 🔀	\top		\vdash	Physical facilities install		1	0.5	П		+	-
	\neg	rmanc	e wi	th Approved Procedures .2653, .2654, .2658 Compliance with variance, specialized process,		1 0	T		Т		56 IN	0)	(T		Meets ventilation & light designated areas used		_	0.5	X		\perp	
25	IN O	, UTINA		reduced oxygen packaging criteria or HACCP plan			'					TOTAL DEDUCTIONS:										





Score: 99.5

Comment Addendum to Food Establishment Inspection Report Establishment ID: 3034012718 Establishment Name: LOUIE AND HONEY KITCHEN Location Address: 401 WEST END BLVD. Date: 03/22/2023 X Inspection Re-Inspection City: WINSTON SALEM State: NC Comment Addendum Attached? X Status Code: A County: 34 Forsyth Zip: 27101 Water sample taken? Yes X No Category #: IV Wastewater System:

Municipal/Community

On-Site System Email 1:ryan bradford@msn.com Water Supply: Municipal/Community On-Site System Permittee: LAVENDAR AND HONEY KITCHEN, LLC Email 2: Telephone: (336) 416-2658 Email 3: Temperature Observations Effective January 1, 2019 Cold Holding is now 41 degrees or less Item Location Temp Item Location Temp Item Temp 40 mashed potatoes reach in cooler 38 reach in cooler 38 bacon/onion mix reach in cooler 39 ambient reach in cooler 40 cream make unit cooler 38 ambient make unit cooler 38 ambient back reach in cooler 39 milk front cooler 37 ambient front cooler 122 three comp sink hot water 300 three comp sink quat sani 150 quat sani sanitizer bucket 100 cl sani dishmachine First Last Person in Charge (Print & Sign): Sophia Lang Last Regulatory Authority (Print & Sign): Shannon Malonev

REHS ID:2826 - Maloney, Shannon

REHS Contact Phone Number: (336) 703-3382

Verification Required Date:

Authorize final report to be received via Email:





Comment Addendum to Inspection Report

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Date: 03/22/2023 Time In: 1:30 PM Time Out: 3:05 PM

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.

- 47 4-501.11 Good Repair and Proper Adjustment Equipment-REPEAT -replace torn gaskets on milk cooler in front, and reach in make unit. Equipment shall be maintained in good repair.
- 56 6-403.11 Designated Areas Employee Accommodations for eating / drinking / smoking- Employee food stored above establishment items in reach in cooler and hot holding unit. Areas designated for employees to eat, drink, and use tobacco shall be located so that food, equipment, utensils and single use articles are protected from contamination.