Food Establishment Inspection Report

Establishment Name: PIZZA HUT #2582

	Location Address: 5062 STYERS FERRY ROAD												
	City:LEWISVILLE State: North Carolina												
	Zip: 27023 County: 34 Forsyth												
	Ρ	err	nit	te	e: HUT CAROLINAS LLC								
	т	ele	ph	or	ne: (336) 778-2118								
		8) In	isp	ection O Re-Inspection O I	Ec	luc	at	iona	I V	isit		
	٧	Vas	te	wa	ater System:								
	⊗ Municipal/Community O On-Site System												
	Water Supply:												
	Municipal/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													
C	o	mp	lia	nc	e Status	(OUT	r	CDI	R	VR		
S	Supervision .2652												
1	X	оит	N/A		PIC Present, demonstrates knowledge, & performs duties	1		0					
2	X	оит	N/A		Certified Food Protection Manager	1		0					
	mp	loye	e H	ealt	h .2652	-		-					
3	Ņ	оит			Management, food & conditional employee; knowledge, responsibilities & reporting	2	1	0					
4	X	оит			Proper use of reporting, restriction & exclusion	3	1.5	0			\square		
5	X	оит			Procedures for responding to vomiting &	1	0.5	0					
G	Good Hygienic Practices 1 0.3 0												
6	Ņ	ουτ			Proper eating, tasting, drinking or tobacco use	1	0.5						
7		OUT			No discharge from eyes, nose, and mouth	1	0.5	0					
91 8	_	entir OUT	-	on	tamination by Hands .2652, .2653, .2655, .265 Hands clean & properly washed	6 4	2	0			$ \square$		
9		олт		N/O	No bare hand contact with RTE foods or pre-	4	2	0					
	<u> </u>	олт			approved alternate procedure properly followed Handwashing sinks supplied & accessible	2	1	0					
		ove		ouro		4	1	0			L		
		ОЛТ			Food obtained from approved source	2	1	0					
	-	OUT		≫	Food received at proper temperature Food in good condition, safe & unadulterated	2	1	0 0					
	<u> </u>	оит			Required records available: shellstock tags,	\vdash	1				\square		
14	IN	оит	ŊXA	N/O	parasite destruction	2	1	0					
				_	Contamination .2653, .2654	1.							
		OUT OX(T		N/O	Food separated & protected Food-contact surfaces: cleaned & sanitized	3	1.5 1.5		х		\square		
		ОЛТ			Proper disposition of returned, previously served,	2	1	0					
				1970	reconditioned & unsafe food ardous Food Time/Temperature .2653	ſ	Ĺ	Ĺ					
18	IN	ουτ	N/A	N¥∕	Proper cooking time & temperatures	3	1.5	0					
_	_	OUT	_			3 3	1.5				\square		
		оит оит			Proper tooling time & temperatures Proper hot holding temperatures	3	1.5 1.5				\vdash		
22	X	ουτ	N/A	N/O	Proper cold holding temperatures	3	1.5	0					
		ουτ			Proper date marking & disposition Time as a Public Health Control; procedures &	3	1.5	0					
		оит			records	3	1.5	0					
_	-	-		_	sory .2653 Consumer advisory provided for raw/	Т							
25	IN	оит	NA		undercooked foods	1	0.5	0					
H	gh	ly Si	usc	epti	ble Populations .2653	T							
26	IN	оит	Ŋ X A		Pasteurized foods used; prohibited foods not offered	3	1.5	0					
		nica			.2653, .2657	, 							
	h	оит оит	<i>.</i> .		Food additives: approved & properly used Toxic substances properly identified stored & used	1	0.5	0 0			\square		
	-			e w	ith Approved Procedures	1		5					
		оит			Compliance with variance, specialized process,	2	1	0					
					reduced oxygen packaging criteria or HACCP plan	Ĺ	_	Ĺ					

Establishment ID: 3034020874

Date: <u>04/29/2024</u> Time In: <u>10:20 AM</u> Category#: II	_Status Code: <u>A</u> _Time Out: <u>11:50 AM</u>
FDA Establishment Type:	Fast Food Restaurant

No. of Risk Factor/Intervention Violations: 1 No. of Repeat Risk Factor/Intervention Violations: 0

Compliance Status							OUT	Г	CDI	R	VF
				d Wa		I					
30		OUT			Pasteurized eggs used where required	1	0.5	0			_
31	Ň	OUT	<i>x</i> .		Water and ice from approved source	2	1	0			
32	IN	оит	¢¥A		Variance obtained for specialized processing methods	2	1	0			
Fo	ood	Ten	nper	atur	e Control .2653, .2654						
33	X	оит			Proper cooling methods used; adequate equipment for temperature control	1	0.5	0			
34	IN	оит	N/A	N}∕¢	Plant food properly cooked for hot holding	1	0.5	0			
35	IN	OUT	N/A	N)X0	Approved thawing methods used	1	0.5	0			
36	X	оит			Thermometers provided & accurate	1	0.5	0			
Fo	od	Ide	ntific	catio	n .2653						
37	X	OUT			Food properly labeled: original container	2	1	0			
Pr	eve	entic	n of	f Foo	d Contamination .2652, .2653, .2654, .2656, .26	57					
38	M	out Insects & rodents not present; no unauthorized animals					1	0			
39	M	оит			Contamination prevented during food preparation, storage & display	2	1	0			
40	M	оит			Personal cleanliness	1	0.5	0			
41	X	OUT			Wiping cloths: properly used & stored	1	0.5	0			
42	IN	оит	N∭A		Washing fruits & vegetables	1	0.5	0			
Р	ор	er Us	se o	f Ute	ensils .2653, .2654						
43	M	OUT			In-use utensils: properly stored	1	0.5	0			
44	M	оит			Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0			
45	M	оит			Single-use & single-service articles: properly stored & used	1	0.5	0			
46	M	OUT			Gloves used properly	1	0.5	0			
U	ens	sils a	and	Equi	ipment .2653, .2654, .2663						
47	×	оит			Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	0			
48	IN	¢¥(⊤			Warewashing facilities: installed, maintained & used; test strips	x	0.5	0		x	
49	IN	о хт			Non-food contact surfaces clean	X	0.5	0		Х	
P	iys	ical	Faci	lities	s .2654, .2655, .2656						
_		OUT	N/A		Hot & cold water available; adequate pressure	1	0.5	0			
51		оит			Plumbing installed; proper backflow devices	2	1	0			
52	M	OUT			Sewage & wastewater properly disposed	2	1	0			
53	M	оит	N/A		Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0			
54	M	оит			Garbage & refuse properly disposed; facilities maintained	1	0.5	0			
55	IN	о){(т			Physical facilities installed, maintained & clean	Ж	0.5	0		Х	
56	M	оит			Meets ventilation & lighting requirements; designated areas used	1	0.5	0			
					TOTAL DEDUCTIONS:	3					



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Comment Addendum to Food Establishment Inspection Report

Establishment Name: PIZZA HUT #2582	Establishment ID: 3034020874				
Location Address: 5062 STYERS FERRY ROAD City: LEWISVILLE County: 34 Forsyth Zip: 27023	X Inspection Re-Inspection Date: 04/29/2024 Educational Visit Status Code: A Comment Addendum Attached? Category #: II				
Wastewater System: Municipal/Community On-Site System Water Supply: Municipal/Community On-Site System Permittee: HUT CAROLINAS LLC	Comment Addendum Attached? X Category #: <u>II</u> Email 1:ha037915@hutamerican.com Email 2:gpeak@flynnrg.com				
Telephone: (336) 778-2118	Email 3:				

Temperature Observations						
tem/Location	Temp	Item/Location	Temp	Item/Location	Temp	
heese/prep cooler	39					
epperoni/prep cooler	34					
am/prep cooler	36					
hicken/prep cooler	41					
ausage/prep cooler	40					
omato/prep cooler	39					
mbient air/cooler 1	33					
ambient air/cooler 2	32					
alad/walk in cooler	39					
uat sanitizer/3 compartment sink	200 ppm					
hlorine sanitizer/dish machine	50 ppm					
not water/3 compartment sink	148					
uat sanitizer/sanitizer bucket	200 ppm					
	First	Last		Gre Rroch	<i></i>	
Person in Charge (Print & Sign):	James	Roach		vy ····································		

Person in Charge (Print & Sign): James Roach First Last Regulatory Authority (Print & Sign): Daygan Shouse Core: Verification Dates: Priority: Priority Foundation: REHS ID:3316 - Shouse, Daygan Authorize final report to REHS Contact Phone Number: (336) 704-3141 be received via Email: Division of Public Health
 Environmental Health Section
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Date: 04/29/2024 Time In: 10:20 AM Time Out: 11:50 AM

Certifications								
Name	Certificate #	Туре	Issue Date	Expiration Date				
James Roach		Food Service	08/05/2023	08/05/2028	_			
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.								

16 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (Pf) 3 metal pans, 3 plastic pans, and several ladles with food debris. Food-contact surfaces shall be clean to sight and touch. CDI: Dishes moved to 3 compartment sink to be rewashed.

- 48 4-501.14 Warewashing Equipment, Cleaning Frequency (C). There is buildup of lime residue and hard water deposits inside dish machine that needs to be cleaned. A warewashing machine; the compartments of sinks, basins, or other receptacles used for washing and rinsing equipment, utensils, or raw foods, or laundering wiping cloths; and drainboards or other equipment used to substitute for drainboards shall be cleaned: before use; throughout the day at a frequency necessary to prevent recontamination of equipment and utensils and to ensure that the equipment performs its intended function; and if used, at least every 24 hours. REPEAT.
- 49 4-602.13 Nonfood Contact Surfaces (C). Cleaning needed on all green shelving in kitchen and dish washing area. Nonfoodcontact surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues. REPEAT.
- 55 6-501.12 Cleaning, Frequency and Restrictions (C) The following areas need to be cleaned: Floor under 3 compartment sink/ warewashing area, floor in walk in cooler, floor under clean equipment rack, and wall behind the pizza oven. Physical facilities shall be cleaned as often as necessary to keep them clean. REPEAT.