

Food Establishment Inspection Report

Score: 97

Establishment Name: KING'S CRAB SHACK AND OYSTER BAR II

Establishment ID: 3034012561

Location Address: 520 HANES MALL BLVD.

City: WINSTON SALEM State: North Carolina

Zip: 27103 County: 34 Forsyth

Permittee: KING'S CRAB SHACK II, INC.

Telephone: (336) 997-9195

☒ Inspection ☐ Re-Inspection

Wastewater System:

☒ Municipal/Community ☐ On-Site System

Water Supply:

☒ Municipal/Community ☐ On-Site Supply

Date: 12/01/2022 Status Code: A

Time In: 11:50 AM Time Out: 1:30 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 0

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 | 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"/> OUT/N/A/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 | Proper cooling time & temperatures | 3 | 1.5 | 0 |
| 21 | <input checked="" type="checkbox"/> OUT/N/A/N/O | 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"/> OUT/N/A/N/O | Proper date marking & disposition | 3 | 1.5 | 0 |
| 24 | <input checked="" type="checkbox"/> IN OUT | Time as a Public Health Control; procedures & records | 3 | 1.5 | 0 |
| Consumer Advisory .2653 | | | | | |
| 25 | <input checked="" type="checkbox"/> OUT/N/A | Consumer advisory provided for raw/undercooked foods | 1 | 0.5 | 0 |
| Highly Susceptible Populations .2653 | | | | | |
| 26 | <input checked="" type="checkbox"/> IN OUT | Pasteurized foods used; prohibited foods not offered | 3 | 1.5 | 0 |
| Chemical .2653, .2657 | | | | | |
| 27 | <input checked="" type="checkbox"/> IN OUT | 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 | 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 | 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 | 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"/> OUT N/A 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"/> IN 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"/> IN OUT | Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used | X | 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 | Non-food contact surfaces clean | X | 0.5 | 0 |
| 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"/> OUT | Plumbing installed; proper backflow devices | 2 | 1 | 0 |
| 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"/> IN OUT | Garbage & refuse properly disposed; facilities maintained | 1 | 0.5 | 0 |
| 55 | <input checked="" type="checkbox"/> IN 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: | | | | | 3 |



Comment Addendum to Food Establishment Inspection Report

| | |
|--|---|
| Establishment Name: <u>KING'S CRAB SHACK AND OYSTER BAR II</u> Location Address: <u>520 HANES MALL BLVD.</u> City: <u>WINSTON SALEM</u> State: <u>NC</u> County: <u>34 Forsyth</u> Zip: <u>27103</u> Wastewater System: <input checked="" type="checkbox"/> Municipal/Community <input type="checkbox"/> On-Site System Water Supply: <input checked="" type="checkbox"/> Municipal/Community <input type="checkbox"/> On-Site System Permittee: <u>KING'S CRAB SHACK II, INC.</u> Telephone: <u>(336) 997-9195</u> | Establishment ID: <u>3034012561</u> <input checked="" type="checkbox"/> Inspection <input type="checkbox"/> Re-Inspection Date: <u>12/01/2022</u> Comment Addendum Attached? <input checked="" type="checkbox"/> Status Code: <u>A</u> Water sample taken? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Category #: <u>IV</u> Email 1: <u>wkingery@hotmail.com</u> Email 2: _____ Email 3: _____ |
|--|---|


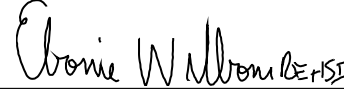
Temperature Observations

Effective January 1, 2019 Cold Holding is now 41 degrees or less

| Item | Location | Temp | Item | Location | Temp | Item | Location | Temp |
|---------------|---------------|------|------|----------|------|------|----------|------|
| Potato Wedge | Hot Hold | 142 | | | | | | |
| Chili | Hot Hold | 173 | | | | | | |
| Fish | Final | 199 | | | | | | |
| Fries | Reheat | 178 | | | | | | |
| Shrimp | Final | 206 | | | | | | |
| Slice Tomato | Make Unit | 39 | | | | | | |
| Slaw | Make Unit | 40 | | | | | | |
| Pasta | Make Cooler | 38 | | | | | | |
| Lettuce | Make Unit | 40 | | | | | | |
| Hot Water | Prep Sink | 136 | | | | | | |
| Quat Sani | Three-Comp | 200 | | | | | | |
| Ambient | Oyster Cooler | 37 | | | | | | |
| Sea Crab Soup | Hot Hold | 170 | | | | | | |
| Chicken | Final | 175 | | | | | | |

First
 Person in Charge (Print & Sign): Norbert
First
 Regulatory Authority (Print & Sign): Ebonie

Last
 Cooper Jr
Last
 Wilborn

REHS ID: 3122 - Wilborn, Ebonie

Verification Required Date: _____

REHS Contact Phone Number: _____

Authorize final report to
be received via Email: _____



North Carolina Department of Health & Human Services

• Division of Public Health • Environmental Health Section • Food Protection Program
 DHHS is an equal opportunity employer.
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Comment Addendum to Inspection Report

Establishment Name: KING'S CRAB SHACK AND OYSTER BAR II

Establishment ID: 3034012561

Date: 12/01/2022 **Time In:** 11:50 AM **Time Out:** 1:30 PM

Certifications

| Name | Certificate # | Type | Issue Date | Expiration Date |
|--------------------|---------------|--------------|------------|-----------------|
| Lakisha Ford | 20257569 | Food Service | 02/21/2021 | 02/21/2026 |
| Norbert Cooper Jr. | 18193264 | Food Service | 08/04/2019 | 08/04/2024 |

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.

- 44 4-903.11 (A), (B), and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles Storing (C) Tools used to shuck oyster stored in soiled container. Ice scoop kept in soiled container. Store cleaned equipment, utensils, linens and packages in a clean, dry location.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) REPEAT The fry station prep table legs are beginning to rust. Reach-in freezer has ice buildup. Prep sink missing one of it's front legs. Wheel castor of cart between make unit rusting. Equipment shall be maintained in good repair.
- 4-402.11 Fixed Equipment, Spacing or Sealing - Installation (C) REPEAT Prep sink needs to be recalked to wall. Counter-mounted equipment that is not easily movable shall be installed to allow cleaning of the equipment and areas underneath and around the equipment by being sealed or elevated on legs.
- 49 4-602.13 Nonfood Contact Surfaces (C) REPEAT Cleaning is needed on fans throughout kitchen. Cleaning needed on gaskets of units on cook line. Clean lids of make units. Cart between make units needs additional cleaning. Non-food contact surfaces of equipment shall be cleaned at frequency to prevent accumulation of soil residue.
- 54 5-501.113 Covering Receptacles (C) REPEAT One dumpster door is completely missing. Keep dumpster and other outside waste handling containers for refuse, recyclables, and returnables covered with tight-fitting lids or doors.
- 5-501.114 Using Drain Plugs (C) The recycling dumpster is missing its drain plug. Drains in receptacles and waste handling units for refuse, recyclables, and returnables shall have drain plugs in place.
- 55 6-501.12 Cleaning, Frequency and Restrictions (C) REPEAT Clean floor under equipment such as the oil fryer. Clean wall at the mop sink. Clean wall around the dish machine. Clean wall on cookline. All physical facilities shall be maintained in good repair and shall be cleaned as often as necessary to keep them clean and by methods that prevent contamination of food products.