

# Food Establishment Inspection Report

Score: 98

Establishment Name: 4TH STREET FILLING STATION

Establishment ID: 3034011212

Location Address: 871 W 4TH STREET

City: WINSTON SALEM State: North Carolina

Zip: 27101 County: 34 Forsyth

Permittee: VLASIS RESTAURANT INC

Telephone: (336) 724-7600

☒ Inspection ☐ Re-Inspection

## Wastewater System:

☒ Municipal/Community ☐ On-Site System

## Water Supply:

☒ Municipal/Community ☐ On-Site Supply

Date: 12/02/2022 Status Code: A

Time In: 10:45 AM Time Out: 1:45 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

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
<b>Supervision .2652</b>					
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	
<b>Employee Health .2652</b>					
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
<b>Good Hygienic Practices .2652, .2653</b>					
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
<b>Preventing Contamination by Hands .2652, .2653, .2655, .2656</b>					
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
<b>Approved Source .2653, .2655</b>					
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
<b>Protection from Contamination .2653, .2654</b>					
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
<b>Potentially Hazardous Food Time/Temperature .2653</b>					
18	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cooking time & temperatures	3	1.5	0
19	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Proper reheating procedures for hot holding	3	1.5	0
20	<input checked="" type="checkbox"/> 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"/> IN OUT/N/A/N/O	Proper date marking & disposition	3	1.5	X
24	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Time as a Public Health Control; procedures & records	3	1.5	0
<b>Consumer Advisory .2653</b>					
25	<input checked="" type="checkbox"/> OUT/N/A	Consumer advisory provided for raw/undercooked foods	1	0.5	0
<b>Highly Susceptible Populations .2653</b>					
26	<input checked="" type="checkbox"/> IN OUT	Pasteurized foods used; prohibited foods not offered	3	1.5	0
<b>Chemical .2653, .2657</b>					
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
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>					
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
<b>Safe Food and Water .2653, .2655, .2658</b>					
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
<b>Food Temperature Control .2653, .2654</b>					
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	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> IN OUT	Approved thawing methods used	1	0.5	0
36	<input checked="" type="checkbox"/> OUT	Thermometers provided & accurate	1	0.5	0
<b>Food Identification .2653</b>					
37	<input checked="" type="checkbox"/> OUT	Food properly labeled: original container	2	1	0
<b>Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657</b>					
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
<b>Proper Use of Utensils .2653, .2654</b>					
43	<input checked="" type="checkbox"/> IN OUT	In-use utensils: properly stored	1	0.5	X
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
<b>Utensils and Equipment .2653, .2654, .2663</b>					
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	1	0.5	X
<b>Physical Facilities .2654, .2655, .2656</b>					
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	X
55	<input checked="" type="checkbox"/> IN OUT	Physical facilities installed, maintained & clean	1	0.5	X
56	<input checked="" type="checkbox"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0
<b>TOTAL DEDUCTIONS:</b>					2



# Comment Addendum to Food Establishment Inspection Report

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County: 34 Forsyth Zip: 27101

Wastewater System: ☒ Municipal/Community ☐ On-Site System

Water Supply: ☒ Municipal/Community ☐ On-Site System

Permittee: VLASIS RESTAURANT INC

Telephone: (336) 724-7600

Establishment ID: 3034011212

☒ Inspection ☐ Re-Inspection Date: 12/02/2022

Comment Addendum Attached? ☒ Status Code: A

Water sample taken? ☐ Yes ☒ No Category #: IV

Email 1: thefillingstn1@aol.com

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 - 6/21/2026	Trey Yarbrough	00	feta cheese	salad make unit (top)	40			
hot water	3-comp sink	139	shredded cheese	salad make unit (top)	41			
hot water	dishmachine (chemical sanitizer)	118	corn salsa	salad make unit (top)	40			
dish detergent solution	3-comp sink (wash basin)	116	pimento cheese dip	salad make unit (reach-in)	41			
qt sanitizer (ppm)	3-comp sink	200	spring mix	salad make unit (reach-in)	41			
Cl sanitizer (ppm)	dishmachine	100	crab lobster bisque	steam well	164			
chicken breast	final cook	178	jamalaya rice	walk-in cooler	37			
steak	final cook	146	corn salsa	walk-in cooler	36			
shrimp	final cook	145	crab cake mix	walk-in cooler	38			
rice	ice bath	40	sliced tomatoes	walk-in cooler	38			
tomatoes	ice bath	39	chicken breast	cooling in walk-in cooler @12:02pm	54			
marinara	ice bath	38	chicken breast	cooling in walk-in cooler @12:21pm	47			
sliced tomatoes	sauté make unit (top)	40						
blue cheese	sauté make unit (top)	41						
coleslaw	sauté make unit (top)	38						
sliced tomatoes	sauté make unit (reach-in)	40						
pepper jack cheese slices	chef drawer	38						
sliced ham	chef drawer	38						
sliced turkey	chef drawer	39						
diced tomatoes	salad make unit (top)	40						

Person in Charge (Print & Sign): \_\_\_\_\_

Regulatory Authority (Print & Sign): Travis

\_\_\_\_\_

\_\_\_\_\_

REHS ID: 3095 - Addis, Travis

REHS Contact Phone Number: \_\_\_\_\_

Verification Required Date: \_\_\_\_\_

Authorize final report to be received via Email: \_\_\_\_\_



North Carolina Department of Health & Human Services

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Division of Public Health • Environmental Health Section  
DHHS is an equal opportunity employer.  
Food Establishment Inspection Report, 10/2021

Food Protection Program



## Comment Addendum to Inspection Report

**Establishment Name:** 4TH STREET FILLING STATION

**Establishment ID:** 3034011212

**Date:** 12/02/2022 **Time In:** 10:45 AM **Time Out:** 1:45 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.

- 23 3-501.17 Ready-To-Eat Time / Temperature Control for Safety Food, Date Marking (Pf) Several TCS foods - stored in various cooling units - were passed their marked date of expiration. In server display cooler: 1 container of pasta salad (11/25), and 1 container of coleslaw (11/25); in walk-in cooler: 1 large container of rice pilaf (11/25). All other observed TCS foods were properly date marked and within date of expiration. Refrigerated, ready-to-eat, time/temperature control for safety food prepared and held in a food establishment for more than 24 hours shall be clearly marked to indicate the date or day by which the food shall be consumed on the premises, sold, or discarded when held at a temperature of 41F or less for a maximum of 7 days. The day of preparation shall be counted as Day 1. CDI: All items were voluntarily discarded by PIC. (0 pts)
- 43 3-304.12 In-Use Utensils, Between-Use Storage (C) Several cooking utensils were improperly stored in a container hot water that was measured at 66F at beginning of inspection. Suggest using a container of hot water with a heat source to maintain water at 135F as it is not feasible to replenish the water to 135F manually during active food service. During pauses in food preparation or dispensing, food preparation and dispensing utensils shall be stored: on a clean portion of the food preparation table or cooking equipment only if the in-use utensil and the food-contact surface are cleaned and sanitized; In running water of sufficient velocity to flush particulates to the drain, if used with moist food such as ice cream or mashed potatoes; or in a container of water if the water is maintained at a temperature of at least 135F. CDI: Utensils were removed from water and placed on clean, dry cloth. (0.5 pts)
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) REPEAT. The legs of the 3-comp sink are oxidized and chipping. Replace broken vent on side of sauté make unit. Replace torn gasket in sauté make unit. Equipment shall be maintained in a state of good repair. (1 pt)
- 49 4-601.11 (C) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (C) REPEAT. Additional cleaning is needed on door gaskets in all cooling units to remove accumulated food debris and residues. Including but not limited to: sauté make unit, salad make unit, and walk-in cooler. Clean hood vents on right side of cook line over ovens. Nonfood-contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris. (0.5 pts)
- 54 5-501.114 Using Drain Plugs (C) Drain plug is missing in outside dumpster; call waste management company to repair/replace. Drains in receptacles and waste handling units for refuse, recyclables, and returnables shall have drain plugs in place. (0 pts)
- 55 6-501.12 Cleaning, Frequency and Restrictions (C) Clean large dusty vent above salad make unit. Physical facilities shall be cleaned as often as necessary to keep them clean. (0 pts)