Food Establishment Inspection Report

Establishment Name: TACO BELL

	Location Address: 1003 SOUTH MAIN STREET										
	City:KERNERSVILLE State: North Carolina Zip: 27284 County: 34 Forsyth										
	Zip: 27284 County: 34 Forsyth										
	Permittee: CHARTER CENTRAL LLC										
	Telephone: (336) 993-8226										
	⊗ Inspection ⊖ Re-Inspection										
	Wastewater System:										
	Municipal/Community O On-Site System										
	Water Supply:										
	-				icipal/Community On-Site Supply						
_		0	, 10								
	Fc	bod	bo	rne	e Illness Risk Factors and Public Health Ir	nte	erv	er	ntion	s	
	Ris	sk fa	cto	rs: (Contributing factors that increase the chance of developing foo	db	orne	illr	ness.		
	Pu	blic	Hea	lth	Interventions: Control measures to prevent foodborne illness	or	injur	y			
C	ю	mp	lia	nc	e Status	(OUT	г	CDI	R	VR
S	upe	ervis	ion		.2652	-					
1	Ň	оυт	N/A		PIC Present, demonstrates knowledge, &	1		0			
	ŕ	·			performs duties	-					
2	1	ουτ			Certified Food Protection Manager	1		0			
	Ť	loye		ealt	h .2652 Management, food & conditional employee;	Г					
3	X	ОUT			knowledge, responsibilities & reporting	2	1	0			
4	X	Ουτ			Proper use of reporting, restriction & exclusion Procedures for responding to vomiting &	3	1.5	0			
5	X	оυт			diarrheal events	1	0.5	0			
				nic	Practices .2652, .2653	_					
6 7	1.	OUT	<u> </u>		Proper eating, tasting, drinking or tobacco use No discharge from eyes, nose, and mouth	1	0.5	0			
		-	-	Cont	tamination by Hands .2652, .2653, .2655, .265	-	0.5	U			<u> </u>
8	_	О ДТ	-		Hands clean & properly washed	4	X	0		Х	
9		оит		N/O	No bare hand contact with RTE foods or pre-	4	2	0			
					approved alternate procedure properly followed Handwashing sinks supplied & accessible	2	1	0			
	Image: Marcine Source Handwashing sinks supplied & accessible 2 1 0 Approved Source .2653, .2655 .2655										<u> </u>
		OUT			Food obtained from approved source	2	1	0			
-	-	оит	-	Ŋ\$¢		2	1	0			
13	X	OUT			Food in good condition, safe & unadulterated Required records available: shellstock tags,	2	1	0			
14	IN	ουτ	NXA	N/O	parasite destruction	2	1	0			
Р	rot	ectio	on fi	rom	Contamination .2653, .2654						
	1.			N/O	Food separated & protected	3		_			
	<u> </u>	OUT	-		Food-contact surfaces: cleaned & sanitized Proper disposition of returned, previously served,		1.5				
17	R	оит			reconditioned & unsafe food	2	1	0			
					ardous Food Time/Temperature .2653	1.					
	1	OUT	<u> </u>			3 3	1.5 1.5				
	1.	OUT			Proper cooling time & temperatures	3	1.5				
	· ·	OUT	<u> </u>			3	1.5	-	V		
	÷	ОX(Т OUT			Proper cold holding temperatures Proper date marking & disposition	3 3	1X5 1.5	0	X		X
-	1	олт	-		Time as a Public Health Control; procedures &	3	1.5	0			
	<u> </u>	1			records	5	1.5	Ů			
	<u> </u>	1	<u> </u>	_	sory .2653 Consumer advisory provided for raw/	Т					
25	IN	оит	NA		undercooked foods	1	0.5	0			
н	igh	ly S	usc	epti	ble Populations .2653	_					
26	IN	оит	NXA		Pasteurized foods used; prohibited foods not offered	3	1.5	0			
С	her	mica	1		.2653, .2657	-					-
27	IN	оит	N}∕A		Food additives: approved & properly used	1	0.5	0			
		оυт			Toxic substances properly identified stored & used	2	1	0			
	Γ				ith Approved Procedures .2653, .2654, .2658 Compliance with variance, specialized process,	Г					
29	IN	оит	NXA		reduced oxygen packaging criteria or HACCP plan	2	1	0			
					the state of the s						

Establishment ID: 3034012853

Date: 05/23/2023	_Status Code: _A
Time In: 10:10 AM	_Time Out:12:35 PM
Category#: IV	
FDA Establishment Type:	Fast Food Restaurant

No. of Risk Factor/Intervention Violations: 2 No. of Repeat Risk Factor/Intervention Violations: 1

					and physical objects into foods.						
С	or	npl	iar	ice	Status		OUT	r	CDI	R	۷
Sa	ıfe∣	Food	d an	d Wa	ater .2653, .2655, .2658						
30	IN	оит	¢¥(A		Pasteurized eggs used where required	1	0.5	0			
31	X	OUT			Water and ice from approved source	2	1	0			
32	2 IN OUT X Variance obtained for specialized processing methods							0			
Food Temperature Control .2653, .2654											
33	×	оит			Proper cooling methods used; adequate equipment for temperature control						
34	X	оит	N/A	N/O	Plant food properly cooked for hot holding	1	0.5	0			
35	X	OUT	N/A	N/O	Approved thawing methods used	1	0.5	0			
36	X	OUT			Thermometers provided & accurate	1	0.5	0			
Fo	ood	Ide	ntifie	catio	n .2653						
37	X	OUT			Food properly labeled: original container	2	1	0			
Pr	eve	entic	on o	fFoo	od Contamination .2652, .2653, .2654, .2656, .26	57					
38	M	оит	ουτ Insects & rodents not present; no unauthorized animals					0			
39	IN)X (⊤			Contamination prevented during food preparation, storage & display	2	1	x			
40	<i>.</i> .	оит			Personal cleanliness	1	0.5	0			
41	<i>``</i>	OUT			Wiping cloths: properly used & stored	1	0.5	0			
42	IN	OUT	NXA		Washing fruits & vegetables	1	0.5	0			
P	op	er Us	se o	fUte	ensils .2653, .2654					_	
43	M	Mour In-use utensils: properly stored		1	0.5	0					
44	M	оит			Utensils, equipment & linens: properly stored, dried & handled	1	1 0.5 0				
45		оит			Single-use & single-service articles: properly stored & used	1	0.5	0			
46	M	OUT			Gloves used properly	1	0.5	0			
U	tens	sils a	and	Equi	ipment .2653, .2654, .2663	_	_			_	
47	IN	¢%(⊺			Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1 0.5 🗴		x			
48		% (⊤			Warewashing facilities: installed, maintained & used; test strips	1	‰	0			2
		OUT			Non-food contact surfaces clean	1	0.5	0			
	-			ilitie							
_		OUT	N/A		Hot & cold water available; adequate pressure			0			
51	_	OUT			Plumbing installed; proper backflow devices			0			
52 53		оит оит	T Sewage & wastewater properly disposed 2 1 0 T N/A Toilet facilities: properly constructed, supplied & cleaned 1 0.5 0					0 0			
54	IN)X (⊺			Garbage & refuse properly disposed; facilities maintained	1 0.5 🕅					
55	IN	о)((т			Physical facilities installed, maintained & clean 1 0.5 K						
56		оит			Meets ventilation & lighting requirements; designated areas used 1 0.5 0						
					TOTAL DEDUCTIONS:	4					



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Comment Addendum to Food Establishment Inspection Report

Establishment Name: TACO BEL	L
Location Address: 1003 SOUTH	MAIN STREET
City: KERNERSVILLE	State:NC
County: 34 Forsyth	Zip: <u>27284</u>
Wastewater System: 👿 Municipal/Comr	nunity 🔲 On-Site System

X Municipal/Community On-Site System

Establishment ID: 3034012853

X Inspection Re-Inspection	Date: 05/23/2023			
Comment Addendum Attached? X	Status Code: A			
Water sample taken? Yes X No	Category #: IV			
Email 1:jjones@charterfoods.net				

Email 2:dbell@charterfoods.net

Telephone: (336) 993-8226

Permittee: CHARTER CENTRAL LLC

Water Supply:

Temperature Observations

Email 3:

	Effective	Janu	ary 1, 20 ⁻	19 Cold Holding is	now 41 degre	es or less	
ltem Tomato	Location Dine In Side Make Line	Temp 50	Item Beans	Location Drive Through Hot Line	Temp Item 148	Location	Temp
Cheese	Dine In Side Make Line	45	Rice	Drive Through Hot Line	189		
Lettuce	Dine In Side Make Line	45	Sausage	Drive Through Hot Line	160		
Cheese	Dine In Side Make Line Reach		Beef	Hot Box	148		
Ambient	Dine In Side Make Line Reach In	ⁿ 43	Beans	Hot Box	147		
Tomato	Drive Through Side Make Line	_e 37	Eggs	Commercial Reheat for Hot Holding	197		
Cheese	Drive Through Side Make Line	_e 35	Steak	Walk In Cooler	31		
Lettuce	Drive Through Side Make Line	_e 33	Beef	Walk In Cooler	38		
Cheese	Drive Through Side Make Line	_e 41	Eggs	Walk In Cooler	35		
Hashbrown	Hot Cabinet	144	Hot Water	3 Comp Sink	135		
Chicken	Dine In Hot Line	141	Sanitizer Quaternary	3 Comp Sink	400		
Steak	Dine In Hot Line	182					
Beef	Dine In Hot Line	183					
Black Bean	Dine In Hot Line	193					
Bean	Dine In Hot Line	197					
Rice	Dine In Hot Line	184					
Chicken	Drive Through Hot Line	161					
Steak	Drive Through Hot Line	165					
Beef	Drive Through Hot Line	167					
Black Beans	Drive Through Hot Line	172					
Person in (Firs Charge (Print & Sign): Ang Firs	ela		Last Harvey Last	Angela	Howay	
Regulatory Au	uthority (Print & Sign): Gler	ı		Pugh	/Hen/in	H	

REHS ID:3016 - Pugh, Glen

Verification Required Date: 05/26/2023

REHS Contact Phone Number: (336) 703-3164

Authorize final repor

Authorize final report to be received via Email:



North Carolina Department of Health & Human Services D Page 1 of _____

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 Division of Public Health
 Environmental Health Section
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Food Protection Program

Comment Addendum to Inspection Report

Establishment Name: TACO BELL

Establishment ID: 3034012853

Date: 05/23/2023 Time In: 10:10 AM Time Out: 12:35 PM

		Certification	าร							
Name	Certificate #	Туре	Issue Date	Expiration Date						
Angela Harvey	22708556	Food Service		10/03/2027						
Violations of		ected within the time frames be		s 8-405.11 of the food code.						
§ 2-301.12 imme UTENSILS, and u ***Employee arriv	8 2-301.14 When to Wash (P) - FOOD EMPLOYEES shall clean their hands and exposed portions of their arms as specified under § 2-301.12 immediately before engaging in FOOD preparation including working with exposed FOOD, clean EQUIPMENT and UTENSILS, and unwrapped SINGLE-SERVICE and SINGLE-USE ARTICLES. ***Employee arrived at work to start shift, clocked in at the register, and then went to put on disposable gloves without washing hands first. CDI PIC had employee wash hands.									
CONTROL FOR ***The make line been set up appro the unit (unit is br	SAFETY FOOD shall be r unit on the dine in side wa oximately 45 minutes prio and new and may just ne	naintained: at 41F or below as not maintaining food at r so all food was taken bac	w. 41F or below (see pg. 2 ck to walk in cooler to c nperature of reach porti	(P) - TIME/TEMPERATURE 2 for temperatures). The line had hill quickly and work order placed fo on measured 43.5F on EHS ling.						

- 39 3-307.11 Miscellaneous Sources of Contamination (C) FOOD shall be protected from contamination that may result from a factor or source not specified under Subparts 3-301 3-306.
 ***The air vents are missing diffusers and blowing extremely hard. They are screened with 1/2" grates, but one of the vents has insulation materials that has been blown through stuck on the screen. This could introduce physical contaminates into the food as items are not covered on the make line.
- 47 4-501.11 Good Repair and Proper Adjustment Equipment (C) Equipment shall be maintained in good repair. ***The bottom door to the hot box closest to office needs to be adjusted so door can close properly.
- 48 4-302.14 Sanitizing Solutions, Testing Devices (Pf) A test kit or other device that accurately measures the concentration in MG/L of SANITIZING solutions shall be provided.
 ***Facility did not have test strips for the quaternary ammonia sanitizer. PIC stated that they were lost when they were moving items back into the store after remodel. A verification will be made by 6-1-2023.
- 54 55-501.115 Maintaining Refuse Areas and Enclosures (C) A storage area and enclosure for REFUSE, recyclables, or returnables shall be maintained free of unnecessary items, as specified under § 6-501.114, and clean. ***Left over paint and other construction materials have been left at the dumpster area and will need to be removed.
- 55 6-501.11 Repairing Premises, Structures, Attachments, and Fixtures Methods (C) Physical facilities shall be maintained in good repair.
 ***The air vents are missing diffusers and blowing extremely hard. One of the vents has insulation materials that has been blown

***The air vents are missing diffusers and blowing extremely hard. One of the vents has insulation materials that has been blown through stuck on the screen. This could introduce physical contaminates into the food as items are not covered on the make line.