

# Food Establishment Inspection Report

Score: 94.5

Establishment Name: KFC G135196

Establishment ID: 3034012247

Location Address: 2390 LEWISVILLE CLEMMONS RD

City: CLEMMONS State: North Carolina

Zip: 27012 County: 34 Forsyth

Permittee: FQSR LLC

Telephone: (336) 766-8630

☒ Inspection ☐ Re-Inspection ☐ Educational Visit**Wastewater System:**☒ Municipal/Community ☐ On-Site System**Water Supply:**☒ Municipal/Community ☐ On-Site Supply

Date: 04/09/2024 Status Code: A

Time In: 1:30 PM Time Out: 3:35 PM

Category#: III

FDA Establishment Type: Fast Food Restaurant

No. of Risk Factor/Intervention Violations: 2

No. of Repeat Risk Factor/Intervention Violations: 1

**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 <input type="checkbox"/> N/A	PIC Present, demonstrates knowledge, & performs duties	1	0	
2	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> 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 <input type="checkbox"/> N/A <input type="checkbox"/> O	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	4	2	0
10	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Handwashing sinks supplied & accessible	2	X	0
<b>Approved Source .2653, .2655</b>					
11	<input checked="" type="checkbox"/> OUT	Food obtained from approved source	2	1	0
12	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Required records available: shellstock tags, parasite destruction	2	1	0
<b>Protection from Contamination .2653, .2654</b>					
15	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> O	Food separated & protected	3	1.5	0
16	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Food-contact surfaces: cleaned & sanitized	3	1.5	X
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 <input type="checkbox"/> N/A <input type="checkbox"/> O	Proper cooking time & temperatures	3	1.5	0
19	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Proper reheating procedures for hot holding	3	1.5	0
20	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Proper cooling time & temperatures	3	1.5	0
21	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Proper hot holding temperatures	3	1.5	0
22	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> O	Proper cold holding temperatures	3	1.5	0
23	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> O	Proper date marking & disposition	3	1.5	0
24	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> O	Time as a Public Health Control; procedures & records	3	1.5	0
<b>Consumer Advisory .2653</b>					
25	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Consumer advisory provided for raw/undercooked foods	1	0.5	0
<b>Highly Susceptible Populations .2653</b>					
26	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Pasteurized foods used; prohibited foods not offered	3	1.5	0
<b>Chemical .2653, .2657</b>					
27	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food additives: approved & properly used	1	0.5	0
28	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Toxic substances properly identified stored & used	2	1	0
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>					
29	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	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"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> O	Plant food properly cooked for hot holding	1	0.5	0
35	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	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 <input type="checkbox"/> N/A	Washing fruits & vegetables	1	0.5	0
<b>Proper Use of Utensils .2653, .2654</b>					
43	<input checked="" type="checkbox"/> OUT	In-use utensils: properly stored	1	0.5	0
44	<input checked="" type="checkbox"/> OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0
45	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Single-use & single-service articles: properly stored & used	X	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 type="checkbox"/> IN <input checked="" type="checkbox"/> 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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Non-food contact surfaces clean	X	0.5	0
<b>Physical Facilities .2654, .2655, .2656</b>					
50	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> 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 <input type="checkbox"/> N/A	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0
54	<input checked="" type="checkbox"/> OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	0
55	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Physical facilities installed, maintained & clean	X	0.5	0
56	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	X	0
<b>TOTAL DEDUCTIONS:</b>					5.5



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☒ Inspection    ☐ Re-Inspection    Date: 04/09/2024  
☐ Educational Visit    Status Code: A  
 Comment Addendum Attached? ☒    Category #: III  
 Email 1: 196@kbpfoods.com  
 Email 2: \_\_\_\_\_  
 Email 3: \_\_\_\_\_

[illegible]

*Antonia Dudgeon*

Daggar

Core:

Authorize final report to  
be received via Email:

## Comment Addendum to Inspection Report

**Establishment Name:** KFC G135196

**Establishment ID:** 3034012247

**Date:** 04/09/2024 **Time In:** 1:30 PM **Time Out:** 3:35 PM

### Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Dmitri Dunlap	22428031	Food Service	07/13/2022	07/13/2027

### 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.

- 10 6-301.14 Handwashing Signage (C) No handwashing sign provided at the handwash sink next to drive through. A sign or poster that notifies food employees to wash hands shall be provided at all handwashing sinks used by food employees and shall be clearly visible to food employees. REPEAT.
- 16 4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization - Temperature, pH, Concentration and Hardness (P) Quaternary sanitizer was less than 150 ppm. A quaternary ammonium compound solution shall have a concentration between 200-400 ppm. CDI: Sanitizing solution remade and tested at 200 ppm.
- 45 4-904.11 Kitchenware and Tableware - Preventing Contamination (C) Cups near the drive-thru and the front counter stacked exposing the lip contact surface. Single service and single use articles and cleaned and sanitized utensils shall be handled, displayed, and dispensed so that contamination of food- and lip-contact surfaces is prevented. REPEAT.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) The small refrigerator on front line is not working. Equipment shall be maintained in a proper state of repair. REPEAT.
- 49 4-602.13 Cleaning needed on the following items: Fans of walk in cooler, shelving, undersides of sinks, sides of fryers and cooking equipment, under drink machines, etc. Non-food contact surfaces of equipment shall be cleaned at frequency to prevent accumulation of soil residues. REPEAT
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) Paint and repair door frame at office. Paint gas lines behind cook line where yellow paint has flaked off. Physical facilities shall be maintained in good repair. REPEAT.  
6-501.12 Cleaning, Frequency and Restrictions (C) Clean residue from FRP above 3-comp sink. Additional floor cleaning needed throughout the kitchen especially under the clean dish area. Additional cleaning needed on the wall behind where clean dishes are stored. Cleaning needed on vent above drive thru area. Physical facilities shall be cleaned as often as necessary to keep them clean. REPEAT.
- 56 6-303.11 Intensity - Lighting (C) Lighting is low in the walk in freezer. Lighting shall be increased to 10 foot candles inside walk in freezer. REPEAT.