Food Establishment Inspection Report

	Location Address: 6400 SESSIONS COURT										
	City: CLEMMONS State: North Carolina										
	Zip: 27012 County: 34 Forsyth										
	Ρ	Peri	nit	tte	e: UNCOMMON HOSPITALITY LLC						
	т	ele	ph	or	ne: (336) 766-8417						
			•		ection O Re-Inspection O	Ec	duc	at	iona	al V	isit
	v				ater System:						
	•				nicipal/Community On-Site System						
	.,	~									
	v				apply:						
	Ø Municipal/Community										
\square	Foodborne Illineae Diak Footors and Dublic Use Ith Internet										
	Foodborne Illness Risk Factors and Public Health Interventions Risk factors: Contributing factors that increase the chance of developing foodborne illness.										
					Interventions: Control measures to prevent foodborne illness				1633.		
						Т	, OU1		CDI	Б	VR
	-0	mp	na	nc	e Status		00		CDI	R	VR
S	upe	ervis	ion		.2652	1					
1	IN	oX⊓	N/A		PIC Present, demonstrates knowledge, & performs duties	X		0	Х		
2	X	оυт	N/A		Certified Food Protection Manager	1		0			
E	mp	loye	e H	ealt	h .2652						
3	Ň	олт			Management, food & conditional employee;	2	1	0			
4	Ľ.	олт			knowledge, responsibilities & reporting Proper use of reporting, restriction & exclusion	3	1.5				
5		оυт			Procedures for responding to vomiting &	1	0.5	0			$\left \right $
					diarrheal events	1	0.5	0			Ц
G 6		d Hy		nic	Practices .2652, .2653 Proper eating, tasting, drinking or tobacco use	1	0.5	0			
7	1.	OUT			No discharge from eyes, nose, and mouth	1	0.5				\vdash
P	1	-		Cont	tamination by Hands .2652, .2653, .2655, .265	6					
8	-	Ж т	-		Hands clean & properly washed	4	X	0			X
9	X	оит	N/A	N/O	No bare hand contact with RTE foods or pre-	4	2	0			
10	IN	о х (т	N/A		approved alternate procedure properly followed Handwashing sinks supplied & accessible	2	1	X			$\left - \right $
	-	rove				-	1				Ŀ
		OUT			Food obtained from approved source	2	1	0			
12	1	OUT	-	N X ∕0		2	1	0			
13	X	ουτ			Food in good condition, safe & unadulterated	2	1	0			
14	IN	оит	N∭A	N/O	Required records available: shellstock tags, parasite destruction	2	1	0			
P	rote	ectic	n fr	rom	Contamination .2653, .2654	1					Ŀ
					Food separated & protected	3	1.5	0			
		ØXT			Food-contact surfaces: cleaned & sanitized		1.5		Х	Х	\vdash
		оит			Proper disposition of returned, previously served,	2	1	0			
	-	mtici	be L		reconditioned & unsafe food	<u> </u>					Ŀ
		OUT				3	1.5	0	_		
	-	оит		<i>.</i> .	Proper reheating procedures for hot holding	3	1.5				
	-	OUT		<u> </u>		3	1.5		V		
21 22	-	о)х(т о)х(т				3 3	1×5		Х	Х	
23	+	0%(т				3	1.5	· ·	Х	$\hat{\mathbf{x}}$	\vdash
24	IN	о)(т	N/A	N/O	Time as a Public Health Control; procedures &	3	1.5	x	Х		
					records	5	1.5		~		Ŀ
	T	1		_	sory .2653 Consumer advisory provided for raw/	Т	I				—
25	IN	оит	NXA		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	3	1.5	0			
			1		offered						ш
	-	mica OUT	_		.2653, .2657 Food additives: approved & properly used	1	0.5	0			
28	+	о х т	· ·		Toxic substances properly identified stored & used	2	1	X	Х		\vdash
С	oni	form	anc	e w	ith Approved Procedures .2653, .2654, .2658		_				
29	IN	оит	NXA		Compliance with variance, specialized process,	2	1	0			
Ĺ	Ľ		- - -		reduced oxygen packaging criteria or HACCP plan	1	1	Ĺ			

Establishment ID: 3034011899

Date: <u>04/10/2024</u>	_Status Code: _A						
Time In:2:10 PM	_Time Out: _5:05 PM						
Category#: II							
FDA Establishment Type: Fast Food Restaurant							

No. of Risk Factor/Intervention Violations: 9 No. of Repeat Risk Factor/Intervention Violations: 3

		Bat		Good Retail Practices ractices: Preventative measures to control the addition of pa	the		ok	omio	ala	
6	oou	Ret		and physical objects into foods.	unoș	yens	, u	Iemica	ais,	
Compliance Status						OUT	Г	CDI	R	١
Safe Food and Water .2653, .2655, .2658										
	30 IN OUT A Pasteurized eggs used where required						0			
31 🕅	OUT			Water and ice from approved source	2	1	0			
32 IN	оит	¢¥4		Variance obtained for specialized processing methods	2	1	0			
Food	Food Temperature Control .2653, .2654									
33 X	3 X OUT Proper cooling methods used; adequate equipment for temperature control					0.5	0			
34 IN	OUT	N/A	N)X0	Plant food properly cooked for hot holding	1	0.5	0			
35 IN	OUT	N/A	Ň	Approved thawing methods used	1	0.5	0			
36 🕅	OUT			Thermometers provided & accurate	1	0.5	0			
Food	Ide	ntifie	catio	on .2653						
37 🕅	OUT			Food properly labeled: original container	2	1	0			C
Prev	entic	on o	f Foo	od Contamination .2652, .2653, .2654, .2656, .26	57					
38 瀬	оит			Insects & rodents not present; no unauthorized animals	2	1	0			
39 🎮	оит			Contamination prevented during food preparation, storage & display	2	1	0			
40 X OUT Personal cleanliness					1	0.5	0			
41 🕅	OUT			Wiping cloths: properly used & stored	1	0.5	0			
42 🕅	ουτ	N/A		Washing fruits & vegetables	1	0.5	0			
Prop	er U	se o	fUte	ensils .2653, .2654						
43 🕅	OUT			In-use utensils: properly stored	1	0.5	0			
44 🕅	оит			Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0			
45 IN	≫(⊺			Single-use & single-service articles: properly stored & used	1	0.5	x			
46 🕅	OUT			Gloves used properly	1	0.5	0			
Uten	sils a	and	Equ	ipment .2653, .2654, .2663						
47 IN	≫ ⊺			Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	x	0.5	0		х	
48 🕅	оит			Warewashing facilities: installed, maintained & used; test strips	1	0.5	0			
49 🕅	OUT			Non-food contact surfaces clean	1	0.5	0			
Phys	ical	Faci	ilitie	s .2654, .2655, .2656						
50 🕅		N/A		Hot & cold water available; adequate pressure	1	0.5	0			
51 🕅	-			Plumbing installed; proper backflow devices	2	1	0			Ĺ
52 🕅							0		Ц	
53 🎘	& cleaned					0.5	0			
mantanod						0.5	0			
55 IN OUT Physical facilities installed, maintained & clean 1 0.5 X X										
56 🕅	оυт			Meets ventilation & lighting requirements; designated areas used	1	0.5	0			
1				200.g. alee alee alee	1(_



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Comment Addendum to Food Establishment Inspection Report

Establishment	Name:	WENDY'S #0426	

Location Address: 6400 SESSIONS COURT							
City: CLEMMONS	State:NC						
County: 34 Forsyth	Zip: 27012						
Wastewater System: X Municipal/Community	On-Site System						
Water Supply: X Municipal/Community	On-Site System						
Permittee: UNCOMMON HOSPITALI	TY LLC						

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Establishment ID: 3034011899

X Inspection Re-Inspection	Date: 04/10/2024					
Educational Visit	Status Code: A					
Comment Addendum Attached?	Category #: II					
Email 1:slane@mhgi.net						
Email 2:licensing.permitting@mhgi.net						
Email 3:						

Temp

Telephone: (336) 766-8417

Item/Location

lettuce/makeline (DISCARDED)

Temperature Observations Temp Item/Location Temp Item/Location burger pieces/Henny Penny drawer (DISCARDED) 69 salad/walk-in cooler 41

blue cheese crumbles/makeline (DISCARDED)	61	salad/walk-in cooler	41
mayonnaise/makeline (DISCARDED)	55	romaine/walk-in cooler	37
sliced tomatoes/makeline	37	leaf lettuce/walk-in cooler	36
ranch dressing/makeline (DISCARDED)	43	hot water/prep sink	130
tartar sauce/makeline (DISCARDED)	61	quat sanitizer/3 comp sink (ppm)	400
cheese sauce/makeline base	40	quat sanitizer/towel bucket (ppm)	150
asiago cheese/makeline (DISCARDED)	47		
baked potato/drawer	166		
grilled chicken/drawer	144		
chicken filet/drawer	142		
spicy nuggets/hot holding	143		
french fry/hot holding	143		
raw burger patties/top of burger cooler	50		
raw burger patties /base of burger cooler	38		
half n half/1 door cooler	38		
cheese sauce/ hot hold in front of grill (DISCARDED)	119		
cooked burgers /hot hold on grill	176		
queso /hot hold in front of grill	139		
chili/steam unit	155		
Person in Charge (Print & Sign):	<i>First</i> Etido	<i>Last</i> Ntuen	AA
ана	First	Last	
Regulatory Authority (Print & Sign):	Aubrie	Welch	Automik VAllen et Hs
REHS ID:2519 - Welch, Aubrie		Verification Dates: Priority:04/12/20	024 Priority Foundation: Core:
REHS Contact Phone Number: (336)	703-3131		ze final report to ived via Email:
North Carolina Department of		Services	er. (CCPH)

Page 2 of _____ Food Establishment Inspection Report, 12/2023

Establishment Name: WENDY'S #0426

Establishment ID: 3034011899

Date: 04/10/2024 Time In: 2:10 PM Time Out: 5:05 PM

		Certificat	ions			
Nan	ne Certificate #	Issue Date	Expiration Date			
Dior	n Johnson	Food Service		01/26/2029		
		Observations and Co		s 8-405.11 of the food code.		
1	2-103.11 (A) - (P) Person-In-Charge	e Duties (Pf) Violations for col es are maintaining the temper oversight of the employees' roo	d holding during inspection atures of time/temperature	. TPHC procedure no being followed. control for safety (TCS) foods during		
8	2-301.14 When to Wash (P) Emplo cabinet without washing hands. Em clean their hands and exposed port food, clean equipment and utensils, task that involves working with food REQUIRED Friday for handwashing	ployee donned Igoves to prep ons of their arms immediately and unwrapped single-servic ; and after engagin in other ad	are food without washing h / before engaging in food p e and single-use articles ar	ands first. Food employees shall rep including working with exposed nd before donning gloves to initiate a		
10	5-202.12 Handwashing Sinks, Insta handwashing sink shall be equipped			er in women's room was 98F. A		
16	16 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (Pf) Food debris/greasy residue on tongs, 3 measuring scoops., 1 coffee urn. Food contact surfaces shall be clean to sight and touch. CDI - placed at 3 comp sink to be re-washed. Repeat with improvement.					
21	1 3-501.16 Maintain TCS foods in hot holding at 135F or aboveP Burger pieces in Henny Penny drawer 69F; unit was not on. Cheese sauce in front of grill 119F. Time/temperature control for safety (TCS) foods held hot shall be maintained at 135F or above. CDI - foods removed for discard; unit was turned on.					
22	2 3-501.16 (A) (2) and (B) Time / Temperature Control for Safety Food, Hot and Cold Holding (P) REPEAT - In top of makeline, bleu cheese 61F, sliced cheese 47F, mayo/sauces 55F (mayo) to 61F (tartar sauce), lettuce 48F. Time/temperature control fo safety (TCS) food held cold shall be maintained at 41F or below. Raw burgers on top of burger cooler were 48-50F. CDI - off temp foods in makeline discarded; ambient air temp in top of unit ranged from 33F-39F, burgers cooked during inspection.					
23	3 3-501.17 Ready-To-Eat Time / Temperature Control for Safety Food, Date Marking (Pf) REPEAT - salads, container of cut romaine lettuce in walk-in cooler were not dated. Container of cheese sauce in base of makeline not dated. Time/temperature control for safety (TCS) foods prepared/opened and held in an establishment for>24 hours must be date marked. CDI - lettuce dated, manager stated salads will be sold by end of day, lettuce was prepped this morning and dated appropriately.					
24	24 3-501.19 Time as a Public Health Control (P) (Pf) Tempered cheese in makeline was not time marked. If time without temperature control is used as the public health control, the food in unmarked containers shall be discarded. CDI - correct time was placed on cheese.					
28	7-102.11 Common Name - Working Containers (Pf) Spray bottle labeled for quat sanitizer contained "triple play" which is a disinfectant. Working containers used for storing poisonous or toxic materials such as cleaners and sanitizers taken from bulk supplies shall be clearly and individually identified with the common name of the material. CDI - PIC discarded.					
45	4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles - Storing (C) Sleeve of cups contacting trash can in cabinet in dining room. Single-service aticles shall be stored in a clean, dry location where they are not exposed to splash, dust, or other contamination.					
47	47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) REPEAT - At beginning of inspection, makeline was not maintaining foods at safe temperatures. Ice machine is out of order. Unused side of makeline is iced up. Significant ice buildup in bun freezer. Equipment shall be maintained in good repair.					

55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) REPEAT. Replace missing ceiling tile at black control box by office. Re-caulk toilet to floor in men's room. Physical facilities shall be maintained in good repair.

Additional Comments

VERIFICATION REQUIRED Friday for handwashing and re-check of makeline temperatures.