

# Food Establishment Inspection Report

Score: 97

Establishment Name: TACO BELL

Establishment ID: 3034012801

Location Address: 1003 SOUTH MAIN STREET

City: KERNERSVILLE State: North Carolina

Zip: 27284 County: 34 Forsyth

Permittee: CHARTER CENTRAL, LLC

Telephone: (336) 993-8226

Inspection  Re-Inspection

**Wastewater System:**

Municipal/Community  On-Site System

**Water Supply:**

Municipal/Community  On-Site Supply

Date: 05/16/2022 Status Code: U

Time In: 12:15 PM Time Out: 2:00 PM

Category#: IV

FDA Establishment Type: Fast Food 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"/> IN				
Certified Food Protection Manager		<input checked="" type="checkbox"/>	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				
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"/> IN				
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"/> IN				
Proper cooking time & temperatures		3	1.5	0	
19	<input checked="" type="checkbox"/> IN				
Proper reheating procedures for hot holding		3	1.5	0	
20	<input checked="" type="checkbox"/> IN				
Proper cooling time & temperatures		3	1.5	0	
21	<input checked="" type="checkbox"/> OUT				
Proper hot holding temperatures		3	1.5	0	
22	<input checked="" type="checkbox"/> OUT				
Proper cold holding temperatures		3	1.5	0	
23	<input checked="" type="checkbox"/> OUT				
Proper date marking & disposition		3	1.5	0	
24	<input checked="" type="checkbox"/> IN				
Time as a Public Health Control; procedures & records		3	1.5	0	
<b>Consumer Advisory .2653</b>					
25	<input checked="" type="checkbox"/> IN				
Consumer advisory provided for raw/undercooked foods		1	0.5	0	
<b>Highly Susceptible Populations .2653</b>					
26	<input checked="" type="checkbox"/> IN				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
<b>Chemical .2653, .2657</b>					
27	<input checked="" type="checkbox"/> IN				
Food additives: approved & properly used		1	0.5	0	
28	<input checked="" type="checkbox"/> OUT				
Toxic substances properly identified stored & used		2	1	0	
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>					
29	<input checked="" type="checkbox"/> IN				
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				
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				
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				
Plant food properly cooked for hot holding		1	0.5	0	
35	<input checked="" type="checkbox"/> 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"/> IN				
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 checked="" type="checkbox"/> IN				
Single-use & single-service articles: properly stored & used		1	0.5	<input checked="" type="checkbox"/>	
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				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
48	<input checked="" type="checkbox"/> OUT				
Warewashing facilities: installed, maintained & used; test strips		1	0.5	0	
49	<input checked="" type="checkbox"/> IN				
Non-food contact surfaces clean		1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
<b>Physical Facilities .2654, .2655, .2656</b>					
50	<input checked="" type="checkbox"/> OUT				
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"/> IN				
Toilet facilities: properly constructed, supplied & cleaned		1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
54	<input checked="" type="checkbox"/> IN				
Garbage & refuse properly disposed; facilities maintained		1	0.5	<input checked="" type="checkbox"/>	
55	<input checked="" type="checkbox"/> IN				
Physical facilities installed, maintained & clean		1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
56	<input checked="" type="checkbox"/> OUT				
Meets ventilation & lighting requirements; designated areas used		1	0.5	0	
<b>TOTAL DEDUCTIONS:</b>					<b>3</b>



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: TACO BELL  
 Location Address: 1003 SOUTH MAIN STREET  
 City: KERNERSVILLE State: NC  
 County: 34 Forsyth Zip: 27284  
 Wastewater System:  Municipal/Community  On-Site System  
 Water Supply:  Municipal/Community  On-Site System  
 Permittee: CHARTER CENTRAL, LLC  
 Telephone: (336) 993-8226

Establishment ID: 3034012801  
 Inspection  Re-Inspection Date: 05/16/2022  
 Comment Addendum Attached?  Status Code: U  
 Water sample taken?  Yes  No Category #: IV  
 Email 1: rs039734@tacobell.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
hot water	3 comp	126	guacamole	make unit dine in	39			
sanitizer quat	3 comp	200	steak	make unit dine in	155			
sanitizer quat	bucket	200	chicken	make unit dine in	150			
steak	walk in cooler	36	rice	make unit dine in	154			
lettuce	walk in cooler	40	beans	make unit dine in	160			
guacamole	walk in cooler	39	lettuce	reach in cooler drive side	40			
tomato	make unit drive side	39	lettuce	reach in cooler dine in side	40			
cheese	make unit drive side	39						
lettuce	make unit drive side	40						
guacamole	make unit drive side	39						
beef	make unit drive side	145						
steak	make unit drive side	155						
rice	make unit drive side	155						
chicken	make unit drive side	150						
beans	hot holding cabinet	150						
beef	hot holding cabinet	153						
rice	hot holding cabinet	155						
tomato	make unit dine in	39						
lettuce	make unit dine in	40						
cheese	make unit dine in	40						

Person in Charge (Print & Sign): Allison *First* *Last*  
Nichols  
 Regulatory Authority (Print & Sign): John *First* *Last*  
Dunigan

*A Nichols*  
 \_\_\_\_\_  
*John Dunigan*  
 \_\_\_\_\_

REHS ID: 3072 - Dunigan, John Verification Required Date: \_\_\_\_\_

REHS Contact Phone Number: (336) 703-3128



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:** TACO BELL

**Establishment ID:** 3034012801

**Date:** 05/16/2022 **Time In:** 12:15 PM **Time Out:** 2:00 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.

- 2 2-102.12(A) Certified Food Protection Manager (C) The person in charge at the time of the inspection was not a certified food protection manager. The person in charge shall be a certified food protection manager who has shown proficiency of required information through passing a test that is part of an accredited program.
- 45 4-904.11 Kitchenware and Tableware - Preventing Contamination (C) Several stacks of cups were stack too High exposing the lip contact portions of the cup. Single-service articles shall be handled, displayed, and dispensed so that contamination of food- and lip-contact surfaces is prevented.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) REPEAT. Reseal ice machine on beverage station. Seal beverage machine to prep table. The legs to the tea beverage prep table are chipping paint. Continue to work on repairs noted on transitional permit comment addendum.
- 49 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (C)REPEAT. Additional cleaning is needed on the left side of the dining room beverage station and the shelving holding the clean dishes. Nonfood Contact Surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris.
- 53 6-501.18 Cleaning of Plumbing Fixtures (C) REPEAT. Additional cleaning needed on the bottom of the men's and women's toilets. Cleaning needed on the handwashing sink in the womens restroom. Plumbing Fixtures such as handwashing sinks, toilets, and urinals shall be cleaned as often as necessary to keep them clean.
- 54 5-501.115 Maintaining Refuse Areas and Enclosures (C) The dumpster pad is heavily soiled with trash and debris. Refuse storage areas shall be maintained clean.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) Broken tiles under the front POS station. Reseal the mop sink to the wall. Low grout throughout the kitchen especially in front of the fryers. Re-caulk around laminate for the upper cabinet, replace laminate stripping where it is missing, bottom of the base cabinet is damaged near the front handwashing sink. Floor drain under the re-thermalizer needs to be re-worked to slop to drain. Physical facilities shall be maintained in good repair. Continue to work on transitional items.  
6-201.13 Floor and Wall Junctures, Coved, and Enclosed or Sealed (C) Add coved base to the mop outside of mop sink The floors in food establishments in which water flush cleaning methods are used shall be provided with drains and be graded to drain, and the floor and wall junctures shall be coved and sealed. Continue to work on repairs noted on transitional permit comment addendum.  
6-501.12 Cleaning, Frequency and Restrictions (C) additional wall and floor cleaning needed throughout the establishment. Dust is building up on the ceiling around air vents and on the walls. Heavy dust build-up on the walls near the mop sink. Physical facilities shall be cleaned as often as necessary to keep them clean.