

# Food Establishment Inspection Report

Score: 95.5

Establishment Name: MONTE DE REY OF HARPER

Establishment ID: 3034012012

Location Address: 4110 HARPER RD

City: CLEMMONS State: North Carolina

Zip: 27012 County: 34 Forsyth

Permittee: MONTE DEY REY OF HARPER INC.

Telephone: (336) 766-5750

☒ Inspection ☐ Re-Inspection

## Wastewater System:

☒ Municipal/Community ☐ On-Site System

## Water Supply:

☒ Municipal/Community ☐ On-Site Supply

Date: 09/19/2022 Status Code: A

Time In: 1:30 PM Time Out: 3:40 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 1

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/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"/> IN OUT	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"/> OUT/N/A/N/O	Proper reheating procedures for hot holding	3	1.5	0
20	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Proper cooling time & temperatures	3	0	X X
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"/> OUT/N/A/N/O	Proper date marking & disposition	3	1.5	0
24	<input checked="" type="checkbox"/> IN OUT	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"/> IN	Proper cooling methods used; adequate equipment for temperature control	X	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	X	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"/> IN	Food properly labeled: original container	2	1	X
<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"/> OUT	In-use utensils: properly stored	1	0.5	0
44	<input checked="" type="checkbox"/> IN	Utensils, equipment & linens: properly stored, dried & handled	X	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	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	X
48	<input checked="" type="checkbox"/> OUT	Warewashing facilities: installed, maintained & used; test strips	1	0.5	0
49	<input checked="" type="checkbox"/> OUT	Non-food contact surfaces clean	1	0.5	0
<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	Garbage & refuse properly disposed; facilities maintained	1	0.5	X
55	<input checked="" type="checkbox"/> IN	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>					4.5



# Comment Addendum to Food Establishment Inspection Report

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Permittee: MONTE DEY REY OF HARPER INC.

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☒ Inspection ☐ Re-Inspection Date: 09/19/2022

Comment Addendum Attached? ☒ Status Code: A

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

Email 1: soterolopez.z@icloud.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	128	ambient air	top of make unit right	39			
hot water	dishmachine	174	ambient air	glass door cooler in back	36			
sanitizer Cl	3 comp	50	ambient air	glass door cooler in front	33			
sanitizer Cl	spray bottle	100	horchata	glass door cooler in front	40			
chicken	final cook	178	beans cooling 1:45 nm	in ice bath	130			
steak	final cook	170	beans cooling 2:00 nm	in ice bath	90			
shredded beef	walk in cooler	45						
diced tomato	walk in cooler	41						
cheese dip	walk in cooler	41						
salsa	walk in cooler	40						
shredded lettuce	make unit on left	41						
diced tomato	make unit on left	41						
pico de gallo	make unit on left	41						
guacamole	make unit on left	40						
shrimp	bottom of make unit on left	40						
ambient air	bottom of make unit on left	38						
raw chicken	make unit right	41						
raw steak	make unit right	41						
raw chorizo	bottom of make unit right	41						
ambient air	bottom of make unit right	39						

First  
Person in Charge (Print & Sign): Sotero

Last  
Lopez

First  
Regulatory Authority (Print & Sign): John

Last  
Dunigan

REHS ID: 3072 - Dunigan, John

Verification Required Date:

REHS Contact Phone Number: (336) 703-3128

Authorize final report to  
be received via Email:

Lopez S

John Dunigan

Lopez S



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:** MONTE DE REY OF HARPER

**Establishment ID:** 3034012012

**Date:** 09/19/2022 **Time In:** 1:30 PM **Time Out:** 3:40 PM

### Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Sotero Lopez	21797893	Food Service	02/22/2022	02/22/2027

### 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.

- 20 3-501.14 Cooling (P) REPEAT. Shredded beef with a prep date of 9/18 was 44-45F. Cooked time/temperature control for safety (TCS) food shall be cooled from 135F to 70F in 2 hours max, and within a total of 6 hours from 135F to 41F or less. CDI - Shredded beef was discarded, discussion about cooling methods.
- 33 3-501.15 Cooling Methods (Pf) REPEAT - Shredded beef was in deep metal containers with tight fitting lids and did not cool quickly enough. Cooling shall be accomplished in accordance with the time and temperature criteria (135F to 70F in 2 hrs max; 70F to 41F or below in 4 hrs max) by using one or more of the following methods: placing the food in shallow pans; separating into smaller/thinner portions; using rapid cooling equipment; stirring the food in a container placed in an ice water bath; using containers that facilitate heat transfer; adding ice as an ingredient; or other effective methods. CDI - Shredded beef discarded, discussion about cooling techniques.
- 35 3-501.13 Thawing (C) - REPEAT. At the beginning of the inspection four bags of raw beef were thawing in the prep sink with no water running. The raw beef was not submerged in water. Time/temperature control for safety food shall be thawed under refrigeration that maintains the food temperature at 41F or less, or completely submerged under running water at a water temperature of 70F or below with sufficient water velocity to agitate and float off loose particles in an overflow. CDI: The items were moved to the walk in cooler to finish thawing.
- 37 3-302.12 Food Storage Containers Identified with Common Name of Food (C) A container of a white powder identified by the person in charge as sugar was lacking a label. Except for containers holding food that can be readily and unmistakably recognized such as dry pasta, working containers holding food or food ingredients that are removed from their original packages for use in the food establishment, such as cooking oils, flour, herbs, potato
- 44 4-901.11 Equipment and Utensils, Air-Drying Required (C) REPEAT. Several small plastic containers nested together were still wet. Allow to air dry before stacking.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) Shelving inside of the class upright coolers are beginning to rust. Equipment shall be maintained in good repair.
- 54 5-501.115 Maintaining Refuse Areas and Enclosures (C) Minor trash and leaf debris on the dumpster pad. Refuse storage areas shall be maintained clean.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) Reseal the base of the toilet in the women's toilet room to the floor. Physical facilities shall be maintained in good repair.