Food Establishment Inspection Report

Establishment Name: BREAKFASTIME FAMILY HOUSE #6	Establishment ID: 3034012463
Location Address: 2630 LEWISVILLE-CLEMMONS RD. City: CLEMMONS State: North Carolina Zip: 27012 County: 34 Forsyth Permittee: KOTRONAKI, LLC	Date: 03/21/2024 Status Code: Time In: 10:00 AM Time Out: _1 Category#: IV
Telephone: (336) 448-0022	FDA Establishment Type: Full-Service
	T DA Establishment Type. Tun Corvice
Wastewater System: ⊗ Municipal/Community	No. of Risk Factor/Intervention Violation No. of Repeat Risk Factor/Intervention Vio
Ø Municipal/Community	

Date: 03/21/2024 Time In: 10:00 AM	_Status Code: A _Time Out: _11:45 AM
Category#: IV	
FDA Establishment Type	: Full-Service Restaurant
No. of Risk Factor/Intervolution	

Score: 99

		Ø	/ IV	luli	icipal/Community On-Site Supply						
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											
С	oı	mp	lia	nc	e Status	OUT		Γ	CDI	R	VR
Supervision .2652											
1	X	оит	N/A		PIC Present, demonstrates knowledge, & performs duties	1		0			
2	X	оит	N/A		Certified Food Protection Manager	1		0			
Er	am	loye	e H	ealt	h .2652	_			· ·		
3	Ė	оит			Management, food & conditional employee;	2	1	0			
4		оит			knowledge, responsibilities & reporting Proper use of reporting, restriction & exclusion	3	1.5	0			
5	<u> </u>	оит			Procedures for responding to vomiting & diarrheal events	1	0.5	0			
-		4 11/	aio	nio I		_		Н			
		OUT			Practices .2652, .2653 Proper eating, tasting, drinking or tobacco use	1	0.5	0			
7	!	оит	_	H	No discharge from eyes, nose, and mouth	1	0.5	-			
Pı	ev	enti	ng (Cont	tamination by Hands .2652, .2653, .2655, .265	6					
8	X	оит	Ĺ	П	Hands clean & properly washed	4	2	0			
9	X	оит	N/A	N/O	No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	4	2	0			
10	M	оит	N/A		Handwashing sinks supplied & accessible	2	1	0			
A	ppr	ove	d S	ourc	ce .2653, .2655						
11	X	оит	Г	П	Food obtained from approved source	2	1	0			
12	IN	оит		Ŋ ∕⁄		2	1	0			
13	X	оит		Ш	Food in good condition, safe & unadulterated	2	1	0			
14	IN	оит	1)X (4	N/O	Required records available: shellstock tags, parasite destruction	2	1	0			
Pı	ote	ectio	n fi	rom	Contamination .2653, .2654						
-	-	оит	-	N/O		3	1.5	0			
16	X	оит			Food-contact surfaces: cleaned & sanitized	3	1.5	0			
17	X	оит			Proper disposition of returned, previously served, reconditioned & unsafe food	2	1	0			
					ardous Food Time/Temperature .2653	le.					
⊢	/ `	OUT	-	-	· · · · · · · · · · · · · · · · · · ·	3	1.5	0			
-	-	OUT OUT	-			3	1.5	-			
-	-	OUT	_	-	Proper hot holding temperatures	3	1.5				\vdash
		оит			Proper cold holding temperatures	3	1.5	0			
⊢		оит	-	-	Proper date marking & disposition	3	1.5	0			
24	×	оит	N/A	N/O	Time as a Public Health Control; procedures & records	3	1.5	0			
C	ons	um	er A	dvi	sory .2653						
25	X	оит	N/A		Consumer advisory provided for raw/ undercooked foods	1	0.5	0			
Hi	gh	ly S	usc	epti	ble Populations .2653						
26	IN	оит	ı)XA		Pasteurized foods used; prohibited foods not offered	3	1.5	0			
Chemical .2653, .2657											
		оит			Food additives: approved & properly used	1	0.5	0			
28	X	оит	N/A		Toxic substances properly identified stored & used	2	1	0			
C	onf	orm	anc	e w	ith Approved Procedures .2653, .2654, .2658						
29	IN	оит	ŊXĄ		Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan	2	1	0			

	G	ood	Reta	ail P	Good Retail Practices ractices: Preventative measures to control the addition of pa	tho	gens	, ch	emic	als,	
					and physical objects into foods.						
Compliance Status							OUT	Г	CDI	R	۷R
Sa	afe	Food	d an	d W	ater .2653, .2655, .2658						
30	IN	оит	n X (A		Pasteurized eggs used where required	1	0.5	0		П	
31	X	оит		П	Water and ice from approved source	2	1	0		П	
32	IN	оит)X A		Variance obtained for specialized processing methods	2	1	0			
Food Temperature Control .2653, .2654											
33	IN	о) (т			Proper cooling methods used; adequate equipment for temperature control	1	0.5	X	Х		
34	IN	оит	N/A	Ŋφ	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	оит			Thermometers provided & accurate	1	0.5	0			
F	ood	Ide	ntific	catio	n .2653						
37	X	оит			Food properly labeled: original container	2	1	0			
				f Fo	od Contamination .2652, .2653, .2654, .2656, .26	57					
_		оит			Insects & rodents not present; no unauthorized animals	2	1	0			
39	M	оит			Contamination prevented during food preparation, storage & display	2	1	0			
40	M	оит		П	Personal cleanliness	1	0.5	0		Н	
41	M	оит		П	Wiping cloths: properly used & stored	1	0.5	0		П	
42	M	оит	N/A		Washing fruits & vegetables	1	0.5	0			
Pı	гор	er Us	se o	f Ute	ensils .2653, .2654			_			
43	M	оит	Г		In-use utensils: properly stored	1	0.5	0			
44	M	оит			Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0			
45	M	оит			Single-use & single-service articles: properly stored & used	1	0.5	0			
46	M	OUT			Gloves used properly	1	0.5	0			
U	ten	sils a	and	Equ	ipment .2653, .2654, .2663						
47	IN	ох (т			Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	ð%	0		х	
48	M	оит			Warewashing facilities: installed, maintained & used; test strips	1	0.5	0			
49	M	оит			Non-food contact surfaces clean	1	0.5	0			
PI	hys	ical	Faci	ilitie	s .2654, .2655, .2656						
50	M	оит	N/A		Hot & cold water available; adequate pressure	1	0.5	0			
51	<u> </u>	оит	_		Plumbing installed; proper backflow devices	2	1	0			
52	M	оит		Ш	Sewage & wastewater properly disposed	2	1	0		Ц	
53	M	оит	N/A		Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0		Ц	
		о) (т			Garbage & refuse properly disposed; facilities maintained	1	0.5	_			
55	IN	о х (т	_	\vdash	Physical facilities installed, maintained & clean	1	0X5	0	_	Х	
56	M	оит			Meets ventilation & lighting requirements; designated areas used	1	0.5	0		Ш	
					TOTAL DEDUCTIONS:	1					





Comme	nt Adde	endum to Food E	<u>stablishme</u>	ent Inspection	Report	
Establishment Name: BREAKE	FASTIME FA	AMILY HOUSE #6	Establishme	ent ID: 3034012463		
Location Address: 2630 LEW City: CLEMMONS			X Inspection ☐ Education	Re-Inspection	Date: 03/2 Status Coo	
County: 34 Forsyth		Zip: 27012		endum Attached?	Category #	
Wastewater System: Municipal/C	ommunity			azakos811@hotmail.com		
Telephone: (336) 448-0022			Email 3:			
		Temperature C	bservations			
Item/Location	Temp	Item/Location	Temp	Item/Location		Temp
chicken tender/FINAL COOK	189	final rinse/dish machine	172			
shredded lettuce/small prep cooler	40					
una salad/small prep cooler	39					
urkey/small prep cooler	36					
sauteed onion/small prep cooler drawer	36					
nam/small prep cooler drawer	36					
sausage link/chef's base	41					
soup/steam table	180					
gravy/steam table	168					
diced ham/large prep cooler - base	41					
diced tomatoes/large prep cooler	38					
sausage mixtureq/large prep cooler	40					
ootatoes/walk-in cooler	35					
nam/walk-in cooler	36					
grits/hot cabinet	178					
nashbrowns/hot hold on grill	138					
slaw/prep cooler at front	39					
cut cantaloupe/prep cooler at front	41					
not water/prep sink	136					
quat sanitizer/3 comp ink and towel bucket (ppm)	200					
Person in Charge (Print & Sign):	First Carla First	Last Paterson Last	-	Chang Gas		
Regulatory Authority (Print & Sign):	Aubrie	Welch		AWnia Welch	REUS	
REHS ID:2519 - Welch, Aubrie		Verification Dates: Priority	v:	Priority Foundation:	C	ore:

REHS Contact Phone Number: (336) 703-3131

Authorize final report to be received via Email:



Comment Addendum to Inspection Report

Establishment Name: BREAKFASTIME FAMILY HOUSE #6 Establishment ID: 3034012463

Date: 03/21/2024 Time In: 10:00 AM Time Out: 11:45 AM

Certifications Name Certificate # Type Issue Date Expiration Date Carla Paterson Food Service 02/12/2026

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.

- 33 3-501.15 Cooling Methods (Pf) 2 large plastic containers of hashbrowns were cooling in walk-in freezer on speed rack; when temped at 10:24, they were 119-129F. When temped again at 10:47, top container of hashbrowns was same temperature (119F). 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: placing 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 manager spread hashbrowns out on metal sheet pans in walk-in freezer; after less than 5 minutes, hashbrowns on tray had already cooled to 88F.
- 47 4-501.11 Good Repair and Proper Adjustment Equipment (C) REPEAT Shelf under table at wait station is rusting. Coffee maker has damaged brewing piece. Icing around walk-in freezer doors prevents door from closing tightly. Cracked plastic lids on flour and sugar bins. Equipment shall be maintained in good repair.
- 5-501.113 Covering Receptacles (C) Trash dumpster is overfilled and lids cannot close. Receptacles and waste handling units for refuse shall be kept covered with tight-fitting lids or doors if kept outside the food establishment 5-501.112 Outside Storage Prohibitions (C) Trash dumpster is overfilled and there are trash bags on the ground next to the dumpster. Unprotected plastic bags that contain materials with food residue may not be stored outside.
- 55 6-501.11 Repairing Premises, Structures, Attachments, and Fixtures Methods REPEAT (C) Replace missing ceiling tile by fly fan. Replace missing baseboard tile under chemical storage rack. Repair damaged right corner of back door. Physical facilities shall be maintained in good repair.

Additional Comments

Educational visit due by June 30. Next inspection due July 1 - October 31