

# South Carolina Department of Agriculture

Hugh E. Weathers, Commissioner  
350 Ballard Court, West Columbia, South Carolina 29172  
803-896-0640 | agriculture.sc.gov

## Retail Food Establishment Inspection Report

**Insp Date:** 11/12/2024    **Business ID:** SC017493  
**Business:** IGA FOODLINER #45  
513 SOUTH HAMPTON ST

**Inspection:** C9000293  
**Permit #:** 29-211-00105  
**Phone:** 8034756888

KERSHAW, SC 29067  
**Points:** 99

**Reason:** 01. Routine  
**Results:** A

### Establishment Information

Permit # 29-211-00105 Risk Level 1 - No Cook Owner \_\_\_\_\_ Virtual

### Foodborne Illness Risk Factors & Interventions

IN = In Compliance; OUT = Out of Compliance; NA = Not Applicable; NO = Not Observed; CV = Consecutive Violation

#### Supervision

1. PIC present, demonstration, certification, performance    IN   OUT   NA   NO   CV  
         

#### Employee Health

2. Management; employee knowledge; responsibilities and reporting    IN   OUT   NA   NO   CV  
            
 3. Proper use of reporting, restriction, and exclusion             

#### Employee Good Hygienic Practices

4. Proper eating, tasting, drinking, or tobacco use    IN   OUT   NA   NO   CV  
            
 5. No discharge from eyes, nose, or mouth             

#### Preventing Contamination by Hands

6. Hands clean and properly washed    IN   OUT   NA   NO   CV  
            
 7. No bare-hand contact with RTE foods                 
 8. Handwashing sinks supplied and accessible             

#### Approved Source

9. Food obtained from approved source    IN   OUT   NA   NO   CV  
            
 10. Food received at proper temperature                 
 11. Food in good condition, safe, and unadulterated                
 12. Required records available: shell stock tags, parasite destruction               

#### Protection from Contamination

13. Food separated and protected    IN   OUT   NA   NO   CV  
              
 14. Food-contact surfaces: cleaned and sanitized                
 15. Proper disposition of returned, previously served, reconditioned, and unsafe food             

#### Time/Temperature Control for Safety (TCS Food)

IN   OUT   NA   NO   CV

## Retail Food Establishment Inspection Report

Time/Temperature Control for Safety (TCS Food)	IN	OUT	NA	NO	CV
16. Proper cooking time and temperature	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
17. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
18. Proper cooling time and temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>
19. Proper hot holding temperature	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
20. Proper cold holding temperature	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
<b><i>This item has Notes. See Footnote 1 at end of questionnaire.</i></b>					
21. Proper date marking and disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
22. Time as a Public Health Control: procedures and records	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>

Consumer Advisory	IN	OUT	NA	NO	CV
23. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>

Highly Susceptible Populations	IN	OUT	NA	NO	CV
24. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>

Chemical	IN	OUT	NA	NO	CV
25. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>
26. Toxic substances properly identified, stored, and used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>

Conformance with Approved Procedures	IN	OUT	NA	NO	CV
27. Compliance with variance, specialized process, reduced oxygen packaging criteria, or HACCP plan	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>

### Good Retail Practices

IN = In Compliance; OUT = Out of Compliance; NA = Not Applicable; NO = Not Observed; CV = Consecutive Violation

Safe Food & Water	IN	OUT	NA	NO	CV
28. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>
29. Water and ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
30. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>

Food Temperature Control	IN	OUT	NA	NO	CV
31. Proper cooling methods used, adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
32. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>
33. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>
34. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>

Food Identification	IN	OUT	NA	NO	CV
35. Food properly labeled: original container	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>

Prevention of Food Contamination	IN	OUT	NA	NO	CV
36. Insects and rodents not present; no unauthorized animals	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
37. Contamination prevented during food preparation, storage, and display	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
38. Personal cleanliness	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
39. Wiping cloths: properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>

## Retail Food Establishment Inspection Report

	IN	OUT	NA	NO	CV
--	----	-----	----	----	----

40. Washing fruits and vegetables	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
-----------------------------------	----------------------------------	-----------------------	--	--	--------------------------

	IN	OUT	NA	NO	CV
--	----	-----	----	----	----

41. In-use utensils: properly stored	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
--------------------------------------	----------------------------------	-----------------------	--	--	--------------------------

42. Utensils, equipment, and linens: properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
--	----------------------------------	-----------------------	--	--	--------------------------

43. Single-use and single-service articles: properly stored and used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
--	----------------------------------	-----------------------	--	--	--------------------------

44. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
--------------------------	----------------------------------	-----------------------	--	--	--------------------------

	IN	OUT	NA	NO	CV
--	----	-----	----	----	----

45. Equipment, food, and non-food contact surfaces approved, cleanable, properly designed, constructed, and used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
--	----------------------------------	-----------------------	--	--	--------------------------

46. Warewashing facilities: installed, maintained, and used; test strips	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
--	----------------------------------	-----------------------	--	--	--------------------------

47. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
-------------------------------------	----------------------------------	-----------------------	--	--	--------------------------

	IN	OUT	NA	NO	CV
--	----	-----	----	----	----

48. Hot and cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
---	----------------------------------	-----------------------	--	--	--------------------------

49. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
---	----------------------------------	-----------------------	--	--	--------------------------

50. Sewage and wastewater properly disposed	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
---	----------------------------------	-----------------------	--	--	--------------------------

51. Toilet facilities: properly constructed, supplied, and cleaned	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
--	----------------------------------	-----------------------	--	--	--------------------------

52. Garbage and refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
---	----------------------------------	-----------------------	--	--	--------------------------

53. Physical facilities installed, maintained, and clean	<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>
--	-----------------------	----------------------------------	--	--	--------------------------

***This item has Media/Attachments. See Footnote 2 at end of questionnaire.***

<i>Fail Notes</i>	<i>6-501.12</i>	<i>Core; Cleaning, Frequency and Restrictions [Observed black organic accumulation along ceiling in meat department and white organic accumulation on side of vent in meat department.]</i>
-------------------	-----------------	---

54. Meets ventilation and lighting requirements; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
--	----------------------------------	-----------------------	--	--	--------------------------

	IN	OUT	NA	NO	CV
--	----	-----	----	----	----

55. Chapter 8: Compliance and Enforcement	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
---	----------------------------------	-----------------------	--	--	--------------------------

56. Chapter 9: Standards for Additional Operations	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
--	----------------------------------	-----------------------	--	--	--------------------------

Comments
----------

Inspection Information
------------------------

Is a Follow-Up Required? No                      Is a Routine required within 60 days? No

Notification
--------------

Violations may be subject to enforcement action including but not limited to a monetary penalty of \$1,000.00 per violation for each day of non-compliance per S.C. Code Ann. Section 44-1-150 and S.C. Regulation 61-25. If the retail food establishment obscures, covers, defaces, relocates, or removes the posted grade decal, this is a violation of S.C. Regulation 61-25 and may result in enforcement action. Information collected on this form is open to public scrutiny or release in accordance with the Freedom of Information Act.

# Retail Food Establishment Inspection Report

**Footnote 1**

**Notes:**

All observed cold holding temperatures are 41°F or lower.

**Footnote 2**

Ceiling



Vent

