

Food Establishment Inspection Report

Score: 96

Establishment Name: ANNA'S PIZZERIA

Establishment ID: 4092015222

Location Address: 100 N SALEM ST

City: APEX State: North Carolina

Zip: 27502 County: 92 Wake

Permittee: ANNA'S OF APEX INC

Telephone: (919) 267-6237

Inspection Re-Inspection Educational Visit

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 09/04/2025 Status Code: A

Time In: 2:00 PM Time Out: 4:00 PM

Category#: III

FDA Establishment Type: _____

No. of Risk Factor/Intervention Violations: 3

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 |
|--|--|-----|-------------------------------------|-------------------------------------|-------------------------------------|
| Supervision .2652 | | | | | |
| 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 | | |
| Employee Health .2652 | | | | | |
| 3 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Management, food & conditional employee; knowledge, responsibilities & reporting | | 2 | 1 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 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 | |
| Good Hygienic Practices .2652, .2653 | | | | | |
| 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 | |
| Preventing Contamination by Hands .2652, .2653, .2655, .2656 | | | | | |
| 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 | |
| Approved Source .2653, .2655 | | | | | |
| 11 | <input checked="" type="checkbox"/> OUT | | | | |
| Food obtained from approved source | | 2 | 1 | 0 | |
| 12 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Required records available: shellstock tags, parasite destruction | | 2 | 1 | 0 | |
| Protection from Contamination .2653, .2654 | | | | | |
| 15 | <input checked="" type="checkbox"/> OUT/N/A/N/O | | | | |
| Food separated & protected | | 3 | 1.5 | 0 | |
| 16 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Food-contact surfaces: cleaned & sanitized | | 3 | <input checked="" type="checkbox"/> | 0 | |
| 17 | <input checked="" type="checkbox"/> OUT | | | | |
| Proper disposition of returned, previously served, reconditioned & unsafe food | | 2 | 1 | 0 | |
| Potentially Hazardous Food Time/Temperature .2653 | | | | | |
| 18 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Proper cooking time & temperatures | | 3 | 1.5 | 0 | |
| 19 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Proper reheating procedures for hot holding | | 3 | 1.5 | 0 | |
| 20 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Proper cooling time & temperatures | | 3 | 1.5 | 0 | |
| 21 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Proper hot holding temperatures | | 3 | 1.5 | 0 | |
| 22 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Proper cold holding temperatures | | 3 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 23 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Proper date marking & disposition | | 3 | 1.5 | 0 | |
| 24 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Time as a Public Health Control; procedures & records | | 3 | 1.5 | 0 | |
| Consumer Advisory .2653 | | | | | |
| 25 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| Consumer advisory provided for raw/undercooked foods | | 1 | 0.5 | 0 | |
| Highly Susceptible Populations .2653 | | | | | |
| 26 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| Pasteurized foods used; prohibited foods not offered | | 3 | 1.5 | 0 | |
| Chemical .2653, .2657 | | | | | |
| 27 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| Food additives: approved & properly used | | 1 | 0.5 | 0 | |
| 28 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| Toxic substances properly identified stored & used | | 2 | 1 | 0 | |
| Conformance with Approved Procedures .2653, .2654, .2658 | | | | | |
| 29 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| 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 |
|--|--|-----|-------------------------------------|-------------------------------------|----------|
| Safe Food and Water .2653, .2655, .2658 | | | | | |
| 30 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| 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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| Variance obtained for specialized processing methods | | 2 | 1 | 0 | |
| Food Temperature Control .2653, .2654 | | | | | |
| 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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| Plant food properly cooked for hot holding | | 1 | 0.5 | 0 | |
| 35 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| Approved thawing methods used | | 1 | 0.5 | 0 | |
| 36 | <input checked="" type="checkbox"/> OUT | | | | |
| Thermometers provided & accurate | | 1 | 0.5 | 0 | |
| Food Identification .2653 | | | | | |
| 37 | <input checked="" type="checkbox"/> OUT | | | | |
| Food properly labeled: original container | | 2 | 1 | 0 | |
| Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657 | | | | | |
| 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 <input checked="" type="checkbox"/> N/A | | | | |
| Washing fruits & vegetables | | 1 | 0.5 | 0 | |
| Proper Use of Utensils .2653, .2654 | | | | | |
| 43 | <input checked="" type="checkbox"/> OUT | | | | |
| In-use utensils: properly stored | | 1 | 0.5 | 0 | |
| 44 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Utensils, equipment & linens: properly stored, dried & handled | | 1 | <input checked="" type="checkbox"/> | 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 | |
| Utensils and Equipment .2653, .2654, .2663 | | | | | |
| 47 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used | | 1 | <input checked="" type="checkbox"/> | 0 | |
| 48 | <input checked="" type="checkbox"/> OUT | | | | |
| Warewashing facilities: installed, maintained & used; test strips | | 1 | 0.5 | 0 | |
| 49 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Non-food contact surfaces clean | | 1 | 0.5 | <input checked="" type="checkbox"/> | |
| Physical Facilities .2654, .2655, .2656 | | | | | |
| 50 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> 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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| Toilet facilities: properly constructed, supplied & cleaned | | 1 | 0.5 | <input checked="" type="checkbox"/> | |
| 54 | <input checked="" type="checkbox"/> OUT | | | | |
| Garbage & refuse properly disposed; facilities maintained | | 1 | 0.5 | 0 | |
| 55 | <input checked="" type="checkbox"/> OUT | | | | |
| Physical facilities installed, maintained & clean | | 1 | 0.5 | 0 | |
| 56 | <input checked="" type="checkbox"/> OUT | | | | |
| Meets ventilation & lighting requirements; designated areas used | | 1 | 0.5 | 0 | |
| TOTAL DEDUCTIONS: | | | | | 4 |



Comment Addendum to Food Establishment Inspection Report

Establishment Name: ANNA'S PIZZERIA
 Location Address: 100 N SALEM ST
 City: APEX State: NC
 County: 92 Wake Zip: 27502
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: ANNA'S OF APEX INC
 Telephone: (919) 267-6237

Establishment ID: 4092015222
 Inspection Re-Inspection Date: 09/04/2025
 Educational Visit Status Code: A
 Comment Addendum Attached? Category #: III
 Email 1:
 Email 2:
 Email 3: felipefreile@yahoo.com

Temperature Observations

| Item/Location | Temp | Item/Location | Temp | Item/Location | Temp |
|--|------|-------------------------------|------|---------------|------|
| pasta (cooling)/WIC | 60 | marinara/steam well | 164 | | |
| eggplant (cooling)/WIC | 50 | grilled chicken/cookline prep | 40 | | |
| pizza sauce (cooling)/WIC | 44 | sausage/cookline prep | 40 | | |
| pasta (cooling 75min)/WIC | 49 | masala sauce/cookline prep | 39 | | |
| eggplant (cooling 75min)/WIC | 44 | marinara/cookline prep | 40 | | |
| pizza sauce (cooling 75min)/WIC | 38 | ham/cookline prep | 39 | | |
| mozzarella cheese/prep | 39 | pasta/cookline prep | 41 | | |
| cut lettuce/prep | 40 | lima beans/cookline prep | 39 | | |
| sliced tomato/prep | 39 | ambient air/cookline prep | 34 | | |
| ambinet air/prep | 38 | wings/cookline lowboy | 40 | | |
| sausage/pizza prep | 40 | ham/cookline lowboy | 40 | | |
| pizza sauce/pizza prep | 41 | ambient air/cookline lowboy | 36 | | |
| eggplant/pizza prep | 40 | cut lettuce/WIC | 41 | | |
| ham/pizza prep | 40 | sliced tomato/WIC | 41 | | |
| ambient air/pizza prep | 40 | marinated chicken/WIC | 38 | | |
| buffalo chicken (discarded)/pizza lowboy | 44 | ambient air/WIC | 36 | | |
| grilled chicken (discarded)/pizza lowboy | 45 | | | | |
| sliced tomatoes (discarded)/pizza lowboy | 45 | | | | |
| ambient air/pizza lowboy | 40 | | | | |
| meat ball/steam well | 176 | | | | |

Person in Charge (Print & Sign): *First* Felipe

Last Freile



Regulatory Authority (Print & Sign): *First* Carla

Last Pressley




REHS ID: 2800 - Pressley, Carla

Verification Dates: Priority:

Priority Foundation:

Core:

REHS Contact Phone Number: (984) 239-0850

Authorize final report to be received via Email: 



Comment Addendum to Inspection Report

Establishment Name: ANNA'S PIZZERIA

Establishment ID: 4092015222

Date: 09/04/2025 **Time In:** 2:00 PM **Time Out:** 4:00 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.

- 3 2-103.11 (O) Person in Charge (Pf)
Employee health policy (Form 1-B) is outdated (does not include nontyphoidal salmonella). Ensure food employees are informed of their responsibility to report required symptoms, illnesses and exposure. EHS provided current employee health policy.
CORRECTED DURING INSPECTION (CDI)
- 16 4-602.12 Cooking and Baking Equipment (C)
The inside of the microwave is soiled. The cavities and door seals of microwave ovens shall be cleaned at least every 24 hours by using the manufacturer's recommended cleaning procedure. Increase microwave cleaning frequency.
- 22 3-501.16 (A) (2) and (B) Time / Temperature Control for Safety Food, Hot and Cold Holding (P)
Several food items found in the lowboy cold holding above 41F (see temperature chart). Maintain TCS foods in cold holding at 41F or less. Food items were discarded. Lowboy is being monitored for repair. ***CDI***
- 44 4-903.11 (A), (B), and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles Storing (C)
Several plastic pans and drinking cups were stored wet stacked. (B) Clean EQUIPMENT and UTENSILS shall be stored as specified under (A) of this section and shall be stored: (1) In a self-draining position that allows air drying. PIC advised to have employees allow dishware to air dry before stacking.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C)
The following items are damaged and shall be repaired, replaced, or removed: torn reach in freezer gasket, cutting boards, exposed wood on counters and wooden shelf stand, and broken/cracked plastic lids and containers.
- 49 4-602.13 Nonfood Contact Surfaces (C)
The gaskets on all lowboy refrigeration units are soiled. 4-601.11(C) Keep non food contact surfaces of equipment clean to avoid build up of dust, food residue or debris. 4-602.13 Non food contact surfaces of equipment shall be cleaned frequently to preclude accumulation of soil residues. Increase lowboy gasket cleaning frequency.
- 53 6-501.18 Cleaning of Plumbing Fixtures (C)
The base of the toilet in the men's room is soiled. Maintain handwashing sinks, toilets and urinals clean. Clean this item.