

# Food Establishment Inspection Report

Score: 96

Establishment Name: CHIPOTLE #2822

Establishment ID: 4092017327

Location Address: 1081 PINE PLAZA DR

City: APEX State: North Carolina

Zip: 27502 County: 92 Wake

Permittee: CHIPOTLE MEXICAN GRILL OF COLORADO, LLC.

Telephone: (919) 362-5435

Inspection  Re-Inspection  Educational Visit

**Wastewater System:**

Municipal/Community  On-Site System

**Water Supply:**

Municipal/Community  On-Site Supply

Date: 06/23/2025 Status Code: A

Time In: 2:00 PM Time Out: 4:30 PM

Category#: IV

FDA Establishment Type: \_\_\_\_\_

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"/> 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"/> IN				
Food-contact surfaces: cleaned & sanitized		3	0	X	
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 OUT/N/A/N/O				
Proper cooking time & temperatures		3	1.5	0	
19	<input checked="" type="checkbox"/> IN 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	1.5	0	
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"/> IN OUT				
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"/> OUT				
Proper cooling methods used; adequate equipment for temperature control		1	0.5	0	
34	<input checked="" type="checkbox"/> OUT N/A N/O				
Plant food properly cooked for hot holding		1	0.5	0	
35	<input checked="" type="checkbox"/> OUT N/A N/O				
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"/> IN				
Insects & rodents not present; no unauthorized animals		2	X	0	X
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"/> IN				
Wiping cloths: properly used & stored		1	0	X	
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"/> OUT				
Utensils, equipment & linens: properly stored, dried & handled		1	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"/> IN				
Non-food contact surfaces clean		1	0	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"/> OUT				
Garbage & refuse properly disposed; facilities maintained		1	0.5	0	
55	<input checked="" type="checkbox"/> IN				
Physical facilities installed, maintained & clean		1	0	0	
56	<input checked="" type="checkbox"/> OUT				
Meets ventilation & lighting requirements; designated areas used		1	0.5	0	
<b>TOTAL DEDUCTIONS:</b>					<b>4</b>



# Comment Addendum to Food Establishment Inspection Report

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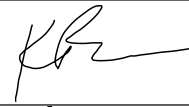
Establishment ID: 4092017327  
 Inspection  Re-Inspection Date: 06/23/2025  
 Educational Visit Status Code: A  
 Comment Addendum Attached?  Category #: IV  
 Email 1:  
 Email 2:  
 Email 3: NC.2822.APEX@CHIPOTLE.COM

## Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
cut lettuce/online service	41	tomato salsa/WIC	41		
guacamole/online service	41	roasted corn/WIC	31		
tofu/online service	155	guacamole/WIC	37		
pinto beans/online service	156				
cut lettuce/serving line	41				
brown rice/serving line	158				
black beans/serving line	150				
shredded chicken/serving line	157				
shredded beef/serving line	154				
tomato salsa/serving line	41				
roasted corn/serving line	41				
shredded cheese/serving line	41				
ambient air/RIC	39				
tomato salsa/RIC	41				
cut lettuce/RIC	41				
guacamole/RIC	41				
shredded cheese/RIC	40				
roasted corn/RIC	40				
ambient air/WIC	36				
fajita mix/WIC	41				

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

*Last* Reeves



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

*Last* Pressley




REHS ID: 2800 - Pressley, Carla

Verification Dates: Priority:

Priority Foundation: 07/03/2025 Core:

REHS Contact Phone Number: (984) 239-0850

Authorize final report to be received via Email: 



## Comment Addendum to Inspection Report

**Establishment Name:** CHIPOTLE #2822

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**Date:** 06/23/2025 **Time In:** 2:00 PM **Time Out:** 4:30 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.

- 16 4-602.11 Equipment Food-Contact Surfaces and Utensils - Frequency (P)  
The beverage dispensing nozzles on the organic lemonade machine were heavily soiled with build up. (4) In EQUIPMENT such as BEVERAGE dispensing nozzles EQUIPMENT shall be cleaned (b) Absent manufacturer specifications, at a frequency necessary to preclude accumulation of soil or mold. The PIC cleaned the nozzles. \*\*\*CORRECTED DURING INSPECTION (CDI)\*\*\*
- 38 6-501.111 Controlling Pests (Pf)  
Numerous flies observed in the kitchen, especially by the dishwashing area. The premises shall be maintained free of insects, rodents and other pests. Utilize approved methods of pest control, keep drains and equipment clean and keep doors closed to minimize flies. The PIC has been advised to review and adjust fly control methods. \*\*\*WILL VERIFY WITHIN 10 DAYS\*\*\*
- 41 3-304.14 Wiping Cloths, Use Limitations (C)  
The chemical sanitizing solution was visibly soiled with floating food debris. Maintain sanitizer containers for in-use cloths free of visible debris and soil. The PIC remade and tested the chemical sanitizing solution. \*\*\*CDI\*\*\*
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C)  
The drink reach in cooler and three door upright reach in cooler are pooling water onto the floor. Equipment shall be maintained in good repair. The PIC is advised to have units inspected for repair.
- 49 4-602.13 Nonfood Contact Surfaces (C)  
The following are soiled and shall be cleaned: reach in cooler interior, serving line counters, cubbies storing single service items, and hand washing sink. Non food contact surfaces of equipment shall be cleaned frequently to preclude accumulation of soil residues. Clean the items listed.
- 55 6-501.12 Cleaning, Frequency and Restrictions (C)  
Floors throughout kitchen are soiled including but not limited to high traffic areas, underneath equipment, and corners. Wall at hand washing sinks and grill area are soiled with food residue buildup and splatter. Physical facilities shall be cleaned as often as necessary to keep them clean. Clean these areas more frequently.