

# Food Establishment Inspection Report

Score: 98.5

Establishment Name: AMGEN CAFETERIA - FRIENDSHIP FOOD HALL Establishment ID: 4092019508

Location Address: 4130 FRIENDSHIP RD  
 City: APEX State: North Carolina  
 Zip: 27539 County: 92 Wake  
 Permittee: COMPASS GROUP NAD

Telephone: \_\_\_\_\_  
 Inspection     Re-Inspection     Educational Visit

Wastewater System:  
 Municipal/Community     On-Site System

Water Supply:  
 Municipal/Community     On-Site Supply

Date: 08/20/2025 Status Code: A  
 Time In: 12:50 PM Time Out: 2:15 PM  
 Category#: III  
 FDA Establishment Type: Fast Food Restaurant  
 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</b> .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		
<b>Employee Health</b> .2652										
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</b> .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	
<b>Preventing Contamination by Hands</b> .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	
<b>Approved Source</b> .2653, .2655										
11	<input checked="" type="checkbox"/> OUT					Food obtained from approved source	2	1	0	
12	<input 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 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	
<b>Protection from Contamination</b> .2653, .2654										
15	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> 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</b> .2653										
18	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O					Proper cooking time & temperatures	3	1.5	0	
19	<input 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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O					Proper hot holding temperatures	3	0	0	X
22	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O					Proper cold holding temperatures	3	1.5	0	
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	
<b>Consumer Advisory</b> .2653										
25	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A					Consumer advisory provided for raw/undercooked foods	1	0.5	0	
<b>Highly Susceptible Populations</b> .2653										
26	<input 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	
<b>Chemical</b> .2653, .2657										
27	<input 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	
<b>Conformance with Approved Procedures</b> .2653, .2654, .2658										
29	<input 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					
<b>Safe Food and Water</b> .2653, .2655, .2658										
30	<input 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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A					Variance obtained for specialized processing methods	2	1	0	
<b>Food Temperature Control</b> .2653, .2654										
33	<input checked="" type="checkbox"/> OUT					Proper cooling methods used; adequate equipment for temperature control	1	0.5	0	
34	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/A					Plant food properly cooked for hot holding	1	0.5	0	
35	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/A					Approved thawing methods used	1	0.5	0	
36	<input checked="" type="checkbox"/> OUT					Thermometers provided & accurate	1	0.5	0	
<b>Food Identification</b> .2653										
37	<input checked="" type="checkbox"/> OUT					Food properly labeled: original container	2	1	0	
<b>Prevention of Food Contamination</b> .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	
<b>Proper Use of Utensils</b> .2653, .2654										
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</b> .2653, .2654, .2663										
47	<input checked="" type="checkbox"/> OUT					Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	0	
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</b> .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"/> OUT <input checked="" type="checkbox"/> 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"/> 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	
<b>TOTAL DEDUCTIONS:</b>							<b>1.5</b>			



# Comment Addendum to Food Establishment Inspection Report

AMGEN CAFETERIA - FRIENDSHIP FOOD


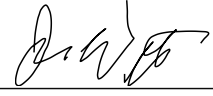
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Establishment ID: 4092019508  
 Inspection  Re-Inspection Date: 08/20/2025  
 Educational Visit Status Code: A  
 Comment Addendum Attached?  Category #: III  
 Email 1: timothy.laslo@compass-usa.com  
 Email 2: \_\_\_\_\_  
 Email 3: \_\_\_\_\_

## Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
raw burger/drawer cooler	36				
burger/grill	160				
turkey breast cooked/walk in cooler	39				
cut melons asst./walk in cooler	39				
egg hard boiled chopped/reach in cooler	37				
salsa cooling/on ice	45				
tomtao cut/make line	37				
turkey cold cuts/make line	37				
chicken/make line	34				
chicken /lamp	125				
egg/salad bar	39				
lettuce/salad bar	41				

Person in Charge (Print & Sign): *First* Tim *Last* L  
 Regulatory Authority (Print & Sign): *First* John *Last* Wulfert

REHS ID: 2701 - Wulfert, John Verification Dates: Priority: \_\_\_\_\_ Priority Foundation: \_\_\_\_\_ Core: \_\_\_\_\_

REHS Contact Phone Number: (919) 500-0976 Authorize final report to be received via Email: \_\_\_\_\_

## Comment Addendum to Inspection Report

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**Date:** 08/20/2025 **Time In:** 12:50 PM **Time Out:** 2:15 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.

21 3-501.16(A)(1) Chicken nuggets under lamp below 135. Maintain TCS foods in hot holding at 135F or above. -P Disposed of.