

Food Establishment Inspection Report

Score: 98

Establishment Name: ARBY'S

Establishment ID: 4092019684

Location Address: 1500 EAST WILLIAMS STREET

City: APEX State: North Carolina

Zip: 27502 County: 92 Wake

Permittee: AES SOUTHEAST LLC

Telephone: _____

Inspection Re-Inspection Educational Visit

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 03/12/2026 Status Code: A

Time In: 2:00 PM Time Out: 3:30 PM

Category#: II

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
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"/> 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	
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/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	
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/OUT				
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	
Potentially Hazardous Food Time/Temperature .2653					
18	<input checked="" type="checkbox"/> 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	
Consumer Advisory .2653					
25	<input checked="" type="checkbox"/> IN/OUT				
Consumer advisory provided for raw/undercooked foods		1	0.5	0	
Highly Susceptible Populations .2653					
26	<input checked="" type="checkbox"/> IN/OUT				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
Chemical .2653, .2657					
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	
Conformance with Approved Procedures .2653, .2654, .2658					
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
Safe Food and Water .2653, .2655, .2658					
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	
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"/> 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	
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/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"/> 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	
Utensils and Equipment .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"/> IN/OUT				
Non-food contact surfaces clean		1	0.5	0	
Physical Facilities .2654, .2655, .2656					
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"/> 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: 2					



Comment Addendum to Food Establishment Inspection Report

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 Water Supply: Municipal/Community On-Site System
 Permittee: AES SOUTHEAST LLC
 Telephone: _____

Establishment ID: 4092019684
 Inspection Re-Inspection Date: 03/12/2026
 Educational Visit Status Code: A
 Comment Addendum Attached? Category #: II
 Email 1: mbunn@aesgrouppl.com
 Email 2: _____
 Email 3: compliance@aesgroupplc.com

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Peace cobbler roll/Lamp	142				
Chicken tenders/Lamp	147				
Mozzarella sticks /Lamp	145				
Fries/Final cook	201				
Chicken breast/Final cook	200				
Shredded lettuce/Prep	41				
Sliced tomatoes /Prep	41				
Ham/Prep	41				
Turkey/Prep	40				
Ambient air/WIC	32				
Brisket /WIC	37				
Turkey/WIC	38				
Ham/WIC	37				
Corn beef/WIC	38				
Sliced tomatoes /WIC	39				
Sliced cheese/WIC	39				
Shredded lettuce/WIC	38				

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

Last Brooks

Courtney Brooks

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

Last Pressley

Carla G. 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: _____

Courtney Brooks



Comment Addendum to Inspection Report

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Date: 03/12/2026 **Time In:** 2:00 PM **Time Out:** 3:30 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 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (Pf) Meat slicer and scale soiled with food debris and grease build up. Equipment food contact surfaces and utensils shall be clean to sight and touch. PIC had roast beef slicer station cleaned. ***CORRECTED DURING INSPECTION (CDI)***
- 49 4-602.13 Nonfood Contact Surfaces (C) Prep counter and toaster station soiled with food debris and build up. Non food contact surfaces of equipment shall be cleaned frequently to preclude accumulation of soil residues.