

Food Establishment Inspection Report

Score: 99.5

Establishment Name: FOOD LION #1338 MEAT/SEAFOOD

Establishment ID: 4092021866

Location Address: 620 LAURA DUNCAN RD

City: APEX State: North Carolina

Zip: 27502 County: 92 Wake

Permittee: FOOD LION, LLC

Telephone: (919) 362-3904

Inspection Re-Inspection Educational Visit

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 01/14/2025 Status Code: A

Time In: 2:15 PM Time Out: 3:30 PM

Category#: III

FDA Establishment Type: _____

No. of Risk Factor/Intervention Violations: 0

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	IN OUT/N/A <input checked="" type="checkbox"/>				
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	IN OUT <input checked="" type="checkbox"/>				
Food received at proper temperature		2	1	0	
13	<input checked="" type="checkbox"/> OUT				
Food in good condition, safe & unadulterated		2	1	0	
14	IN OUT/N/A <input checked="" type="checkbox"/>				
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"/> 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	
Potentially Hazardous Food Time/Temperature .2653					
18	IN OUT/N/A <input checked="" type="checkbox"/>				
Proper cooking time & temperatures		3	1.5	0	
19	IN OUT <input checked="" type="checkbox"/> N/O				
Proper reheating procedures for hot holding		3	1.5	0	
20	IN OUT <input checked="" type="checkbox"/> N/O				
Proper cooling time & temperatures		3	1.5	0	
21	IN OUT <input checked="" type="checkbox"/> 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	IN OUT <input checked="" type="checkbox"/> N/O				
Proper date marking & disposition		3	1.5	0	
24	IN OUT <input checked="" type="checkbox"/> N/O				
Time as a Public Health Control; procedures & records		3	1.5	0	
Consumer Advisory .2653					
25	IN OUT <input checked="" type="checkbox"/>				
Consumer advisory provided for raw/undercooked foods		1	0.5	0	
Highly Susceptible Populations .2653					
26	IN OUT <input checked="" type="checkbox"/>				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
Chemical .2653, .2657					
27	IN OUT <input checked="" type="checkbox"/>				
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	IN OUT <input checked="" type="checkbox"/>				
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	IN OUT <input checked="" type="checkbox"/>				
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	IN OUT <input checked="" type="checkbox"/>				
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	IN OUT <input checked="" type="checkbox"/> 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	IN OUT <input checked="" type="checkbox"/>				
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	IN <input checked="" type="checkbox"/> T				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		1	0.5	X	
48	IN <input checked="" type="checkbox"/> T				
Warewashing facilities: installed, maintained & used; test strips		1	X	0	
49	<input checked="" type="checkbox"/> 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:					0.5



Comment Addendum to Food Establishment Inspection Report

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Establishment ID: 4092021866
 Inspection Re-Inspection Date: 01/14/2025
 Educational Visit Status Code: A
 Comment Addendum Attached? Category #: III
 Email 1:
 Email 2:
 Email 3: S1338SM@RETAIL.FOODLION.COM

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Tuna steak/Crab legs /Display case	36				
Shrimp/White fish /Display case, thawing	30				
Lobster tail /Display case	35				
Chicken/Beef/Burgers /Grab and go case	39 - 40				
Chicken wings /Walk-in	33				
Ribs /Walk-in	36				
Beef /Walk-in	36				

First
 Person in Charge (Print & Sign): Deborah
First
 Regulatory Authority (Print & Sign): Matthew

Last
 Williams
Last
 Saliba

REHS ID: 3079 - Saliba, Matthew Verification Dates: Priority: _____ Priority Foundation: _____ Core: _____

REHS Contact Phone Number: (919) 500-6269 Authorize final report to be received via Email: 

Comment Addendum to Inspection Report

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Date: 01/14/2025 **Time In:** 2:15 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.

- 47 4-501.11; Core; Metal grate on drainboard at three comp sink is rusting. Equipment shall be kept in good repair. Replace drainboard grate. No point taken
- 48 4-501.14; Core; Third compartment of sink has brown residue along the basin. The compartments of sinks, drainboards and warewashing equipment shall be cleaned at least every 24 hours, if used. Increase cleaning frequency.

Additional Comments

Facility has not received shellstock in the last 90 days