

# Food Establishment Inspection Report

Score: 97.5

Establishment Name: MARCO'S PIZZA #8403

Establishment ID: 4092025286

Location Address: 1487 KELLY RD

City: APEX State: North Carolina

Zip: 27502-9572 County: 92 Wake

Permittee: ARA NC FOODS LLC

Telephone: (919) 446-5555

Inspection  Re-Inspection  Educational Visit

**Wastewater System:**

Municipal/Community  On-Site System

**Water Supply:**

Municipal/Community  On-Site Supply

Date: 01/02/2026 Status Code: A

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

Category#: II

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 .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	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	IN <input checked="" type="checkbox"/> T/N/A				
Handwashing sinks supplied & accessible		2	X	0	X
<b>Approved Source .2653, .2655</b>					
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 <input checked="" type="checkbox"/> N/A				
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"/> 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 .2653</b>					
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/N/A <input checked="" type="checkbox"/>				
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	<input checked="" type="checkbox"/> OUT/N/A/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	
<b>Consumer Advisory .2653</b>					
25	IN OUT <input checked="" type="checkbox"/>				
Consumer advisory provided for raw/undercooked foods		1	0.5	0	
<b>Highly Susceptible Populations .2653</b>					
26	IN OUT <input checked="" type="checkbox"/>				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
<b>Chemical .2653, .2657</b>					
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	
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>					
29	<input checked="" type="checkbox"/> OUT/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 .2653, .2655, .2658</b>					
30	<input checked="" type="checkbox"/> OUT/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	IN OUT <input checked="" type="checkbox"/>				
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	IN OUT <input checked="" type="checkbox"/> N/O				
Plant food properly cooked for hot holding		1	0.5	0	
35	IN OUT/N/A <input checked="" type="checkbox"/>				
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"/> 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	
<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	IN <input checked="" type="checkbox"/> T				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		1	<input checked="" type="checkbox"/>	0	X
48	<input checked="" type="checkbox"/> OUT				
Warewashing facilities: installed, maintained & used; test strips		1	0.5	0	
49	IN <input checked="" type="checkbox"/> T				
Non-food contact surfaces clean		1	<input checked="" type="checkbox"/>	0	X
<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	IN <input checked="" type="checkbox"/> T				
Physical facilities installed, maintained & clean		1	<input checked="" type="checkbox"/>	0	X
56	<input checked="" type="checkbox"/> OUT				
Meets ventilation & lighting requirements; designated areas used		1	0.5	0	
<b>TOTAL DEDUCTIONS:</b>					<b>2.5</b>






# Comment Addendum to Food Establishment Inspection Report

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 Telephone: (919) 446-5555

Establishment ID: 4092025286  
 Inspection  Re-Inspection Date: 01/02/2026  
 Educational Visit Status Code: A  
 Comment Addendum Attached?  Category #: II  
 Email 1:  
 Email 2:  
 Email 3: nitixapatel2@marcospizza.net

## Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Wings/Ham/Sausage /Fliptop	37 - 39				
Beef /Reach-in	39				
Mozzarella/Pepperoni /Fliptop	40				
Cut tomato/Lettuce /Fliptop	40 - 41				
Wings /Walk-in	40 - 41				
Cut lettuce/Ham /Walk-in	40 - 41				
Sausage/Chicken /Walk-in	40				

	<i>First</i>	<i>Last</i>		
Person in Charge (Print & Sign): Jaykumar		Patel		
	<i>First</i>	<i>Last</i>		
Regulatory Authority (Print & Sign): Matthew		Saliba		
REHS ID: <u>3079 - Saliba, Matthew</u>	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:** 01/02/2026 **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.

- 10 6-301.12; Priority Foundation; Prep area handwashing sink did not have paper towels. Provide paper towels or approved alternative for hand drying at each handwashing sink. CDI- towels replaced.
- 47 4-202.11; Priority Foundation; A plastic container and a plastic food storage lid were cracked. Multiuse food-contact surfaces shall be smooth, free of open seams, cracks, chips, pits, sharp internal angles, crevices and assembled to allow access to clean. CDI- items voluntarily discarded.
- 49 4-601.11 (B) and (C); Core; Back side vents and top of pizza oven have dust and residue accumulation. Vent in walk-in cooler has dust accumulation. The nonfood-contact surfaces of equipment shall be kept free of dust, dirt, food residue and other debris accumulation. Increase cleaning frequency. All other surfaces observed clean. Full point not taken.
- 55 6-501.11; Core; A few tiles on mop sink rim are cracked and pieces are missing. Missing pieces have been temporarily filled with rough grout. Wall corner near mop sink is damaged. Corner trim is coming apart. Physical facilities shall be maintained in good repair. Repair mop sink and wall. Full point may be taken for repeat violations. Repair is pending.

### Additional Comments

Marcos has an approved variance for Pizza sauce held on 24 hour TPHC at room temperature. Container is marked with time sticker.