

Food Establishment Inspection Report

Score: 95.5

Establishment Name: ROSITA'S APEX

Establishment ID: 4092025648

Location Address: 76 HUNTER ST, SUITE 104

City: APEX State: North Carolina

Zip: 27502 County: 92 Wake

Permittee: UZOCHI, LLC

Telephone: _____

Inspection Re-Inspection Educational Visit

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 12/12/2024 Status Code: A

Time In: 3:40 PM Time Out: 5:30 PM

Category#: II

FDA Establishment Type: _____

No. of Risk Factor/Intervention Violations: 4

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"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Management, food & conditional employee; knowledge, responsibilities & reporting | | 2 | 1 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| No bare hand contact with RTE foods or pre-approved alternate procedure properly followed | | 4 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| 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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| Required records available: shellstock tags, parasite destruction | | 2 | 1 | 0 | |
| Protection from Contamination .2653, .2654 | | | | | |
| 15 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| Food separated & protected | | 3 | 1.5 | 0 | |
| 16 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Food-contact surfaces: cleaned & sanitized | | 3 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| Proper cooking time & temperatures | | 3 | 1.5 | 0 | |
| 19 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| Proper reheating procedures for hot holding | | 3 | 1.5 | 0 | |
| 20 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| Proper cooling time & temperatures | | 3 | 1.5 | 0 | |
| 21 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| Proper hot holding temperatures | | 3 | 1.5 | 0 | |
| 22 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| Proper cold holding temperatures | | 3 | 1.5 | 0 | |
| 23 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| Proper date marking & disposition | | 3 | 1.5 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 24 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| Time as a Public Health Control; procedures & records | | 3 | 1.5 | 0 | |
| Consumer Advisory .2653 | | | | | |
| 25 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| Consumer advisory provided for raw/undercooked foods | | 1 | 0.5 | 0 | |
| Highly Susceptible Populations .2653 | | | | | |
| 26 | <input checked="" 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 | |
| Chemical .2653, .2657 | | | | | |
| 27 | <input checked="" 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 | |
| Conformance with Approved Procedures .2653, .2654, .2658 | | | | | |
| 29 | <input checked="" 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 |
|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-------------------------------------|-------------------------------------|-------------------------------------|
| Safe Food and Water .2653, .2655, .2658 | | | | | |
| 30 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| 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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| Variance obtained for specialized processing methods | | 2 | 1 | 0 | |
| Food Temperature Control .2653, .2654 | | | | | |
| 33 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Proper cooling methods used; adequate equipment for temperature control | | 1 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 34 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| Plant food properly cooked for hot holding | | 1 | 0.5 | 0 | |
| 35 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> 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"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Contamination prevented during food preparation, storage & display | | 2 | 1 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 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 | |
| Proper Use of Utensils .2653, .2654 | | | | | |
| 43 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| In-use utensils: properly stored | | 1 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 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"/> OUT | | | | |
| Non-food contact surfaces clean | | 1 | 0.5 | 0 | |
| Physical Facilities .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 | |
| TOTAL DEDUCTIONS: | | | | | 4.5 |



Comment Addendum to Food Establishment Inspection Report


Establishment Name: ROSITA'S APEX
 Location Address: 76 HUNTER ST, SUITE 104
 City: APEX State: NC
 County: 92 Wake Zip: 27502
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: UZOCHI, LLC
 Telephone: _____


Establishment ID: 4092025648
 Inspection Re-Inspection Date: 12/12/2024
 Educational Visit Status Code: A
 Comment Addendum Attached? Category #: II
 Email 1: _____
 Email 2: _____
 Email 3: Uzochi.llc@gmail.com

Temperature Observations

| Item/Location | Temp | Item/Location | Temp | Item/Location | Temp |
|------------------------------------------------------|-----------|---------------|------|---------------|------|
| Cut tomato/Sausage /Pizza prep | 39 - 40 | | | | |
| Pizza sauce /Pizza prep | 38 - 41 | | | | |
| Blue cheese dressing /Small reach-in | 41 | | | | |
| Meatballs /Walk-in, thawing | 33 | | | | |
| Pepperoni/Cut tomato /Walk-in | 40 - 41 | | | | |
| Chicken/Cut lettuce /Salad fliptop | 38 - 41 | | | | |
| Pasta /Reach-in | 39 | | | | |
| Sausage /Reach-in | 40 | | | | |
| Chicken/Mozzarella /Fliptop | 39 - 40 | | | | |
| Shredded mozzarella cheese /Walk-in, prep cool < 1hr | 51 | | | | |
| Cooked peppers /Reach-in, cooling < 2hrs | 67 | | | | |
| Meatballs/Marinara/Hot holding unit | 168 - 170 | | | | |
| Auju/Hot holding unit | 162 | | | | |
| Cooked peppers /Cooling temp #2 | 62 | | | | |
| Shredded mozzarella /Cooling temp #2 | 46 - 48 | | | | |
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Person in Charge (Print & Sign): *First* Iruka *Last* Iwuagwu
 Regulatory Authority (Print & Sign): *First* Matthew *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

Establishment Name: ROSITA'S APEX

Establishment ID: 4092025648

Date: 12/12/2024 **Time In:** 3:40 PM **Time Out:** 5:30 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.

- 3 2-103.11(O); Priority Foundation; No employee health policy was available for review and the onboarding paperwork that PIC provided did not contain employee health reporting requirements. The permit holder shall ensure food employees are informed of their responsibility to report required symptoms, illnesses and exposure to their manager. CDI- provided Form 1B and illness flow chart document to PIC. No points taken today. Facility is new and just opened.
- 9 3-301.11(B); Priority; Observed an employee cutting onion without gloves. This onion was for sandwiches and salads. Employees may not contact exposed ready-to-eat food with their bare hands. Use suitable utensils, single-use gloves or dispensing equipment. CDI- onion voluntarily discarded and glove use education provided.
- 16 4-501.114; Priority; No quat sanitizer was observed in the three compartment sink with active dishwashing occurring. A cutting board was sitting in the sanitizer basin. Maintain sanitizer at correct concentrations when being used to sanitize. Quaternary ammonium solution shall be 200 - 400ppm as directed by manufacturer label. CDI- quat sanitizer added to third compartment and concentration measured over 200ppm after adjustment.
- 23 3-501.17; Priority Foundation; Multiple containers of cooked pasta from yesterday and cooked chicken did not bear dates of preparation. Date mark/label all ready-to-eat TCS foods once opened or prepared and held more than 24hrs. CDI- date marking education provided. Dates added. No points taken today.
- 33 3-501.15; Priority Foundation; Multiple containers of shredded mozzarella were observed in the walk-in cooler with lids and actively cooling from recent prep. Cool TCS foods in shallow portions/containers and leave uncovered if protected from overhead contamination while cooling. CDI- lids taken off containers and containers were placed on a cart near the vent to rapidly cool. Cooling method education provided.
- 39 3-305.11; Core; Observed a bag of onions on the walk-in cooler floor. Store food in a clean, dry location, not exposed to contamination and keep at least 6 inches above the floor. CDI- onions moved to shelf. No point taken.
- 43 3-304.12 (B); Core; Observed a plastic ramekin being used as a scoop in pickled veggies and left in the food. In-use utensils for food that is not TCS must be stored with their handles above the top of the food within containers. Use appropriate dispensing utensils with handles. CDI- ramekin removed and discarded.