

# Food Establishment Inspection Report

Score: 98

Establishment Name: MR. PUEBLA TACOS (WCID #603)

Establishment ID: 4092030345

Location Address: 7700 BLANEY FRANKS RD.

City: APEX State: North Carolina

Zip: 27539 County: 92 Wake

Permittee: CARLOS PACHECO MONTALVO

Telephone: (919) 758-5330

Inspection  Re-Inspection  Educational Visit

**Wastewater System:**

Municipal/Community  On-Site System

**Water Supply:**

Municipal/Community  On-Site Supply

Date: 11/30/2024 Status Code: A

Time In: 10:50 AM Time Out: 12:20 PM

Category#: III

FDA Establishment Type: \_\_\_\_\_

No. of Risk Factor/Intervention Violations: 2

No. of Repeat Risk Factor/Intervention Violations: 1

**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"/> IN/OUT         |     |                                     |                                     |   |
| Proper eating, tasting, drinking or tobacco use  |  | 1   | 0.5                                 | <input checked="" type="checkbox"/> |   |
| 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  | <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"/> IN/OUT/N/A     |     |                                     |                                     |   |
| Handwashing sinks supplied & accessible  |  | 2   | <input checked="" type="checkbox"/> | 0                                   | <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> |
| <b>Approved Source .2653, .2655</b>  |  |     |                                     |                                     |   |
| 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/N/A/N/O |     |                                     |                                     |   |
| 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   | <input checked="" type="checkbox"/> IN/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/N/A/N/O |     |                                     |                                     |   |
| Time as a Public Health Control; procedures & records  |  | 3   | 1.5                                 | 0                                   |   |
| <b>Consumer Advisory .2653</b>   |  |     |                                     |                                     |   |
| 25   | <input checked="" type="checkbox"/> IN/OUT/N/A     |     |                                     |                                     |   |
| Consumer advisory provided for raw/undercooked foods   |  | 1   | 0.5                                 | 0                                   |   |
| <b>Highly Susceptible Populations .2653</b>  |  |     |                                     |                                     |   |
| 26   | <input checked="" type="checkbox"/> IN/OUT/N/A     |     |                                     |                                     |   |
| Pasteurized foods used; prohibited foods not offered   |  | 3   | 1.5                                 | 0                                   |   |
| <b>Chemical .2653, .2657</b>   |  |     |                                     |                                     |   |
| 27   | <input checked="" type="checkbox"/> IN/OUT/N/A     |     |                                     |                                     |   |
| 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"/> IN/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"/> IN/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   | <input checked="" type="checkbox"/> IN/OUT/N/A     |     |                                     |                                     |                                     |
| 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   | <input checked="" type="checkbox"/> IN/OUT/N/A/N/O |     |                                     |                                     |                                     |
| Plant food properly cooked for hot holding   |  | 1   | 0.5                                 | 0                                   |                                     |
| 35   | <input checked="" type="checkbox"/> IN/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                                   |                                     |
| <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"/> IN/OUT         |     |                                     |                                     |                                     |
| Insects & rodents not present; no unauthorized animals   |  | 2   | <input checked="" type="checkbox"/> | 0                                   | <input checked="" type="checkbox"/> |
| 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"/> IN/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   | <input checked="" type="checkbox"/> IN/OUT         |     |                                     |                                     |                                     |
| Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used |  | 1   | 0.5                                 | <input checked="" type="checkbox"/> |                                     |
| 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 .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   | <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>2</b>                            |




# Comment Addendum to Food Establishment Inspection Report


Establishment Name: MR. PUEBLA TACOS (WCID #603)  
 Location Address: 7700 BLANEY FRANKS RD.  
 City: APEX State: NC  
 County: 92 Wake Zip: 27539  
 Wastewater System:  Municipal/Community  On-Site System  
 Water Supply:  Municipal/Community  On-Site System  
 Permittee: CARLOS PACHECO MONTALVO  
 Telephone: (919) 758-5330

Establishment ID: 4092030345  
 Inspection  Re-Inspection Date: 11/30/2024  
 Educational Visit Status Code: A  
 Comment Addendum Attached?  Category #: III  
 Email 1:  
 Email 2:  
 Email 3: carlospmont15@gmail.com


## Temperature Observations

| Item/Location           | Temp | Item/Location | Temp | Item/Location | Temp |
|-------------------------|------|---------------|------|---------------|------|
| Rice/Hot holding unit   | 140  |               |      |               |      |
| Beef/Hot holding unit   | 141  |               |      |               |      |
| Cheese/Hot holding unit | 136  |               |      |               |      |
| Pico/Prep top           | 40   |               |      |               |      |
| Cheese/Prep top         | 39   |               |      |               |      |
| Lettuce/Prep bottom     | 39   |               |      |               |      |
| Chicken/Reach in        | 40   |               |      |               |      |
|                         |      |               |      |               |      |
|                         |      |               |      |               |      |
|                         |      |               |      |               |      |
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|                         |      |               |      |               |      |

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

Regulatory Authority (Print & Sign): Jackson *First* *Last* 

REHS ID: 2802 - Hooton, Jackson Verification Dates: Priority: Priority Foundation: Core:

REHS Contact Phone Number: (919) 710-1927 Authorize final report to be received via Email: 

## Comment Addendum to Inspection Report

**Establishment Name:** MR. PUEBLA TACOS (WCID #603)

**Establishment ID:** 4092030345

**Date:** 11/30/2024 **Time In:** 10:50 AM **Time Out:** 12:20 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.

- 6 2-401.11 Eating, Drinking, or Using Tobacco (C); Employee beverage was being stored above food prep. Employees may drink from a closed beverage if it is stored in an area that prevents potential contamination of food or clean equipment.
- 10 5-205.11; Priority Foundation; While improvements have been made (sink eas not blocked today) the handwashing sink had a soiled sanitizer bucket inside of the basin. Handwashing sinks shall be accessible at all times and used for no purposes other than handwashing. CDI- sanitizer bucket was removed.
- 38 6-202.13; Core; While improvements have been made, a live fly was observed inside of the MFU and was landing on surfaces. The premises shall be maintained free of insects and other pests.
- 47 4-501.12 Cutting Surfaces (C); Cutting board is beginning to develop deep scratches and discoloration. Cutting surfaces shall be kept free of deep scratches and discoloration for proper cleaning.

### Additional Comments

FOOD TRUCK WAS INSPECTED AT 1025 BLUE RIDGE RD, RALEIGH NC