

Food Establishment Inspection Report

Score: 95

Establishment Name: FUEGOS (WCID #723)

Establishment ID: 4092030631

Location Address: 8013 HUMIE OLIVE RD , APEX, NC 27502

City: APEX State: North Carolina

Zip: 27502 County: 92 Wake

Permittee: FUEGOS LLC

Telephone: (919) 561-3671

Inspection Re-Inspection Educational Visit

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 05/28/2025 Status Code: A

Time In: 11:02 AM Time Out: 12:24 PM

Category#: III

FDA Establishment Type: _____

No. of Risk Factor/Intervention Violations: 5

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 <input type="checkbox"/> N/A				
PIC Present, demonstrates knowledge, & performs duties		1	0		
2	<input checked="" type="checkbox"/> IN <input type="checkbox"/> N/A				
Certified Food Protection Manager		1	<input checked="" type="checkbox"/>		
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 <input type="checkbox"/> N/A <input type="checkbox"/> 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 <input type="checkbox"/> N/A				
Handwashing sinks supplied & accessible		2	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
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 type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
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 type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Required records available: shellstock tags, parasite destruction		2	1	0	
Protection from Contamination .2653, .2654					
15	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Food separated & protected		3	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
16	<input checked="" type="checkbox"/> IN <input 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"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cooking time & temperatures		3	1.5	0	
19	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper reheating procedures for hot holding		3	1.5	0	
20	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cooling time & temperatures		3	1.5	0	
21	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper hot holding temperatures		3	1.5	0	
22	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cold holding temperatures		3	1.5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
23	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper date marking & disposition		3	1.5	0	
24	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input 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 type="checkbox"/> OUT <input 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 type="checkbox"/> OUT <input 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 type="checkbox"/> OUT <input type="checkbox"/> N/A				
Food additives: approved & properly used		1	0.5	0	
28	<input checked="" type="checkbox"/> OUT <input 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 type="checkbox"/> OUT <input 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 type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Pasteurized eggs used where required		1	0.5	0	
31	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Water and ice from approved source		2	1	0	
32	<input checked="" type="checkbox"/> IN <input 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"/> OUT				
Proper cooling methods used; adequate equipment for temperature control		1	0.5	0	
34	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Plant food properly cooked for hot holding		1	0.5	0	
35	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Approved thawing methods used		1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
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"/> IN <input 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"/> 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 <input type="checkbox"/> OUT				
Non-food contact surfaces clean		1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
Physical Facilities .2654, .2655, .2656					
50	<input checked="" type="checkbox"/> OUT <input 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"/> IN <input 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: 5					



Comment Addendum to Food Establishment Inspection Report

Establishment Name: FUEGOS (WCID #723)
 Location Address: 8013 HUMIE OLIVE RD , APEX, NC 27502
 City: APEX State: NC
 County: 92 Wake Zip: 27502
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: FUEGOS LLC
 Telephone: (919) 561-3671

Establishment ID: 4092030631
 Inspection Re-Inspection Date: 05/28/2025
 Educational Visit Status Code: A
 Comment Addendum Attached? Category #: III
 Email 1:
 Email 2:
 Email 3: lopezbryan_02@yahoo.com

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
cooling raw ground beef/refrigerator	50				
raw chicken/drawer coolers	40				
raw chorizo/drawer coolers	41				
hotdogs/drawer coolers	40				
cooked chicken/final cook temp	198-200				
sliced tomatoes/prep cooler	37				
shredde mozzarella/prep cooler	39				
chopped lettuce/prep cooler	40				

	<i>First</i>	<i>Last</i>	
Person in Charge (Print & Sign): Bryan		Davalos-Lopez	<u>Bryan Davalos-Lopez</u>
	<i>First</i>	<i>Last</i>	
Regulatory Authority (Print & Sign): Samantha		Sparano	<u>Samantha Sparano</u>
REHS ID: <u>2918 - Sparano, Samantha</u>	Verification Dates: Priority: <u>05/31/2025</u>	Priority Foundation:	Core: <u>Bryan Davalos-Lopez</u>
REHS Contact Phone Number: (919) 618-8964	Authorize final report to be received via Email: _____		

Comment Addendum to Inspection Report

Establishment Name: FUEGOS (WCID #723)

Establishment ID: 4092030631

Date: 05/28/2025 **Time In:** 11:02 AM **Time Out:** 12:24 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.

- 2 2-102.12 (A); Core; The person-in-charge's food protection manager certification expired in 2024 and no other CFPM is available. The person in charge shall be a certified food protection manager who has shown proficiency of required information through passing a test that is part of an accredited program. Renew food protection manager certification before the next inspection.
- 10 5-205.11 (B); Priority foundation; Observed several dishes and utensils stored in the basin of the handwashing sink. A handwashing sink may not be used for purposes other than handwashing. CDI - Utensils and containers removed to allow access to handwashing sink.
- 15 3-304.15(A); Priority; Observed a food employee handling raw bacon then immediately handling hotdogs and sliced ham without changing gloves. If used, single-use gloves shall be used for only one task such as working with ready-to-eat food or with raw animal food, used for no other purpose, and discarded when damaged or soiled, or when interruptions occur in the operation. CDI - Directed food employee to discard gloves and don new ones, educated food employees on proper glove use.
- 16 4-501.114; Priority; The concentration of the chlorine sanitizer solution, used to sanitize food prep surfaces, was tested to be less than 50ppm. A chemical sanitizer used in a sanitizing solution for a manual/mechanical operation shall be used in accordance with the EPA-registered label use instructions and shall be used as follows: a chlorine solution shall have a minimum concentration of 50ppm not to exceed 200ppm. No bleach available in food truck to increase concentration, REHS will follow-up by 5/30/2025.
- 22 3-501.16(A)(2); Priority; One container of raw ground beef was holding above 41F in the refrigerator. TCS (time/temp control for safety) foods in cold holding shall be maintained at 41F or less. CDI - Raw beef was cooling and therefore moved to freezer to rapidly cool. Refrigerator does not appear to effectively hold TCS foods at adequate temperatures, do not store TCS foods (raw meats, eggs, dairy, cooked foods, etc.) in this unit until it is fixed.
- 35 3-501.13 (A), (B), (C); Priority foundation; Observed raw meat thawing on the drainboard of the prep sink at ambient temperature. TCS food shall be thawed: under refrigeration that maintains foods at 41F or less; or completely submerged under running water: at a water temperature of 70F or below, with sufficient water velocity to agitate and float off loose particles in an overflow, and for a period of time that does not allow thawed portions to rise above 41F; or as part of the cooking process. CDI - Thawing meat was moved to another cooler to properly thaw.
- 49 4-601.11(C); Core; Observed a large amount of grease buildup on the hood vents above the flat-top and deep fryers, as well as residue buildup on the exterior of the prep cooler and refrigerator. Nonfood-contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris. Clean these areas to remove residue buildup before the next inspection. Repeat.

Additional Comments

MFU location during inspection: 8013 Humie Olive Rd. Apex, NC 27502. The pushcart/mobile food unit permit holder shall provide the regulatory authority in each county in which food service operations are proposed a list of locations where they will operate. Such lists must be kept current. If a pushcart/mobile food unit goes one year, 365 days, of inactivity or operating outside of Wake County their food permit will no longer be valid.

If there are food or sanitation questions, contact your Registered Environmental Health Specialist at Samantha.Sparano@wake.gov or 919-618-8964.