

# Food Establishment Inspection Report

Score: 100

Establishment Name: BOJANGLES

Establishment ID: 4092011399

Location Address: 1209 LAURA VILLAGE RD

City: APEX State: North Carolina

Zip: 27523-7140 County: 92 Wake

Permittee: TRI ARC FOOD SYSTEMS, INC.

Telephone: (919) 362-1416

☒ Inspection ☐ Re-Inspection ☐ Educational Visit

## Wastewater System:

☒ Municipal/Community ☐ On-Site System

## Water Supply:

☒ Municipal/Community ☐ On-Site Supply

Date: 06/25/2026 Status Code: A

Time In: 10:00 AM Time Out: 11:30 AM

Category#: III

FDA Establishment Type: Fast Food Restaurant

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 |
|---------------------------------------------------------------------|-------------------------------------------------|------------------------------------------------------------------------------------------------|-----|-----|----|
| <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                                                                   | <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"/> OUT/N/A     | Handwashing sinks supplied & accessible                                                        | 2   | 1   | 0  |
| <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      | 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"/> OUT/N/A/N/O | Proper cooking time & temperatures                                                             | 3   | 1.5 | 0  |
| 19                                                                  | <input checked="" type="checkbox"/> OUT/N/A/N/O | Proper reheating procedures for hot holding                                                    | 3   | 1.5 | 0  |
| 20                                                                  | <input checked="" type="checkbox"/> 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      | Time as a Public Health Control; procedures & records                                          | 3   | 1.5 | 0  |
| <b>Consumer Advisory .2653</b>                                      |                                                 |                                                                                                |     |     |    |
| 25                                                                  | <input checked="" type="checkbox"/> IN OUT      | Consumer advisory provided for raw/undercooked foods                                           | 1   | 0.5 | 0  |
| <b>Highly Susceptible Populations .2653</b>                         |                                                 |                                                                                                |     |     |    |
| 26                                                                  | <input checked="" type="checkbox"/> IN OUT      | Pasteurized foods used; prohibited foods not offered                                           | 3   | 1.5 | 0  |
| <b>Chemical .2653, .2657</b>                                        |                                                 |                                                                                                |     |     |    |
| 27                                                                  | <input checked="" type="checkbox"/> IN OUT      | 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      | 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      | 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      | 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"/> OUT N/A 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        |
| <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                                                                        | <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        |
| <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>0</b> |



# Comment Addendum to Food Establishment Inspection Report

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 Wastewater System: ☒ Municipal/Community ☐ On-Site System  
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Establishment ID: 4092011399  
☒ Inspection ☐ Re-Inspection Date: 06/25/2026  
☐ Educational Visit Status Code: A  
 Comment Addendum Attached? ☐ Category #: III  
 Email 1: asher.ace10598@gmail.com  
 Email 2:  
 Email 3: ctaylor@bojanglesrdu.com

## Temperature Observations

| Item/Location                    | Temp | Item/Location | Temp | Item/Location | Temp |
|----------------------------------|------|---------------|------|---------------|------|
| scrambled eggs/final cook        | 160  |               |      |               |      |
| fried ham/final cook             | 175  |               |      |               |      |
| fried chicken/final cook         | 190  |               |      |               |      |
| bo rounds/reheat for hot holding | 201  |               |      |               |      |
| sliced tomatoes/make line        | 38   |               |      |               |      |
| shredded lettuce/make line       | 38   |               |      |               |      |
| sausage patty/make line          | 156  |               |      |               |      |
| sliced cheese/make line          | 40   |               |      |               |      |
| bo bites/hot cabinet             | 159  |               |      |               |      |
| ambient air/hot cabinet          | 176  |               |      |               |      |
| slaw/WIC                         | 37   |               |      |               |      |
| homemade ranch/WIC               | 38   |               |      |               |      |
| salad/WIC                        | 37   |               |      |               |      |
| ambient air/WIC                  | 36   |               |      |               |      |
| bo bites/protein WIC             | 37   |               |      |               |      |
| chicken breast/protein WIC       | 37   |               |      |               |      |
| ambient air/protein WIC          | 36   |               |      |               |      |
| dirty rice/steam table           | 160  |               |      |               |      |
| grits/steam table                | 162  |               |      |               |      |
| fries/steam table                | 154  |               |      |               |      |

First  
 Person in Charge (Print & Sign): Angelo

Last  
 Abanto

First  
 Regulatory Authority (Print & Sign): Carla

Last  
 Pressley

REHS ID: 2800 - Pressley, Carla

Verification Dates: Priority:

Priority Foundation:

Core:

REHS Contact Phone Number: (984) 239-0850

Authorize final report to  
 be received via Email:



North Carolina Department of Health & Human Services

Page 2 of \_\_\_\_\_  
 Division of Public Health • Environmental Health Section  
 DHHS is an equal opportunity employer.  
 Food Establishment Inspection Report, 12/2023

• Food Protection Program

