



Public Health
Environmental Health Services
CAL CODE OFFICIAL INSPECTION REPORT

FACILITY NAME A MART		DATE 4/29/2015	REINSPECTION DATE Next Routine	PERMIT EXPIRATION 4/30/2015
LOCATION 15853 MAIN ST, HESPERIA, CA 92345			INSPECTOR Melissa Nano	
MAILING ADDRESS 15853 MAIN ST, HESPERIA CA 92345			IDENTIFIER: None	
			SERVICE: 001 - Inspection - Routine	
			RESULT: 03 - Corrective Action / No Follow up Required	
			ACTION: 01 - No Further Action Required	
TIME IN 1:56 PM	TIME OUT 2:42 PM	FACILITY ID FA0008042	RELATED ID PR0003604	PE 1647

Based on an inspection this day, the items marked below identify the violation(s) in operation or facilities which must be corrected. The Permittee has the right to a hearing if requested in writing within 15 calendar days of receipt of this notice, to show cause why the permit to operate should not be suspended or revoked.

Failure to correct listed violation(s) prior to the designated compliance date may necessitate an additional reinspection at a charge of \$61.25 per 15 minutes with a minimum time of 30 minutes, and a minimum charge of \$122.50.



SCORE 95

See the following pages for the code sections and general requirements that correspond to each violation listed below.

○ In = In compliance
+ COS = Corrected on-site

○ N/O = Not observed
⊗ MAJ = Major violation

○ N/A = Not applicable
⊗ OUT = Out of compliance

DEMONSTRATION OF KNOWLEDGE			COS	MAJ	OUT
○ In	N/O	1. Demonstration of knowledge; food safety certification			2
EMPLOYEE HEALTH & HYGIENIC PRACTICES					
○ In		2. Communicable disease; reporting, restrictions & excl		4	
○ In	N/O	3. No discharge from eyes, nose, and mouth			2
○ In	N/O	4. Proper eating, tasting, drinking or tobacco use			2
PREVENTING CONTAMINATION BY HANDS					
○ In	N/O	5. Hands clean and properly washed; gloves used prop		4	2
	In	6. Adequate handwashing facilities supplied & accessib			⊗ 2
TIME AND TEMPERATURE RELATIONSHIPS					
○ In	N/O	N/A		4	2
○ In	N/O	N/A		4	2
○ In	N/O	N/A		4	2
○ In	N/O	N/A		4	
○ In	N/O	N/A		4	
PROTECTION FROM CONTAMINATION					
○ In	N/O	N/A			2
○ In		13. Food in good condition, safe and unadulterated		4	2
○ In	N/O	N/A		4	2

FOOD FROM APPROVED SOURCES			COS	MAJ	OUT
○ In		15. Food obtained from approved source		4	
In	N/O	○ N/A 16. Compliance with shell stock tags, condition, display			2
In	N/O	○ N/A 17. Compliance with Gulf Oyster Regulations			2
CONFORMANCE WITH APPROVED PROCEDURES					
In		○ N/A 18. Compliance with variance, specialized process, and HACCP Plan			2
CONSUMER ADVISORY					
In	N/O	○ N/A 19. Consumer advisory provided for raw or undercooked foods			2
HIGHLY SUSCEPTIBLE POPULATIONS					
In		○ N/A 20. Licensed health care facilities/public and private schools; prohibited foods not offered		4	
WATER/HOT WATER					
○ In		21. Hot and cold water available		4	2
LIQUID WASTE DISPOSAL					
○ In		22. Sewage and wastewater properly disposed		4	2
VERMIN					
○ In		23. No rodents, insects, birds, or animals		4	2

SUPERVISION	OUT
24. Person in charge present and performs duties	1
PERSONAL CLEANLINESS	
25. Personal cleanliness and hair restraints	1
GENERAL FOOD SAFETY REQUIREMENTS	
26. Approved thawing methods used, frozen food	1
27. Food separated and protected	1
28. Washing fruits and vegetables	1
29. Toxic substances properly identified, stored, use	⊗
FOOD STORAGE/DISPLAY/SERVICE	
30. Food storage; food storage containers identified	1
31. Consumer self-service	1
32. Food properly labeled & honestly presented	⊗

EQUIPMENT/UTENSILS/LINENS	OUT
33. Nonfood contact surfaces clean	1
34. Warewashing facilities: installed, maintained, used	1
35. Equipment/Utensils approved; installed; clean; good repa	1
36. Equipment, utensils and linens: storage and use	⊗
37. Vending machines	1
38. Adequate ventilation and lighting; designated area	1
39. Thermometers provided and accurate	1
40. Wiping cloths: properly used and stored	1
PHYSICAL FACILITIES	
41. Plumbing: proper backflow devices	1
42. Garbage and refuse properly disposed; facilities m	1
43. Toilet facilities: properly constructed, supplied, clea	1
44. Premises; personal/cleaning items; vermin-proofin	1

PERMANENT FOOD FACILITIES	OUT
45. Floor, walls, ceilings: built, maintained, and clean	1
46. No unapproved private homes/living or sleeping qu	1
SIGNS REQUIREMENTS	
47. Signs posted; last inspection report available	1
48. Food worker cards	2
COMPLIANCE & ENFORCEMENT	
49. Permits Available	
50. Restrooms Required	
51. Plan Review	
52. VC&D	
53. Impoundment	
54. Permit Suspension	



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6. ADEQUATE HANDWASHING FACILITIES SUPPLIED & ACCESSIBLE

POINTS 2	Compliance date not specified	Inspector Comments: Restock paper towel dispenser at back 2 compartment sink which is also used as a hand wash sink. Observed empty.
	Not In Compliance Violation Reference -	

Violation Description: Handwashing soap and towels or drying device shall be provided in dispensers; dispensers shall be maintained in good repair. (113953.2) Adequate facilities shall be provided for hand washing. (113953, 113953.1, 114067(f)). Handwashing sink is not separated from a warewashing sink by a 6 inch high metal splashguard or 24 inch separation. (113953) Handwashing sinks shall not be obstructed, inaccessible, used improperly or kept unclean. (113953.1)

29. TOXIC SUBSTANCES PROPERLY IDENTIFIED, STORED, USED

POINTS 1	Compliance date not specified	Inspector Comments: Label and identify all chemicals with the common name of chemical. Observed an unlabeled chemical spray bottle near two compartment sink.
	Not In Compliance Violation Reference - HSC - 114254, 114254.1	

Violation Description: All poisonous substances, detergents, bleaches, and cleaning compounds shall be stored separate from food, utensils, packing material and food-contact surfaces. (114254, 114254.1, 114254.2) An insecticide, rodenticide, or other pesticide must be used in accordance with the manufacturer's instructions.

32. FOOD PROPERLY LABELED & HONESTLY PRESENTED

POINTS 1	Compliance date not specified	Inspector Comments: Label bagged ice with the following: 1. Common name of food 2. Net weight 3. Name and address of manufacturer or distributor Observed sticker labels on site however facility is not utilizing on ice bags for retail.
	Not In Compliance Violation Reference - HSC - 114087, 114089	

Violation Description: Any food is misbranded if its labeling is false or misleading, if it is offered for sale under the name of another food, or if it is an imitation of another food for which a definition and standard of identity has been established by regulation. (114087, 114089, 114089.1(a, b), 114090, 114093.1) Bulk food available for consumer self-service must have an information label, sign, and/or other method of notification that includes the label information. (114089) Prepackaged food must bear a label that complies with the labeling requirements as prescribed by the Sherman Food, Drug and Cosmetic Law. (114089 and 114089(a))
Restaurants must provide a brochure placed at the point of sale that includes at least calories, sodium, saturated fat, and carbohydrates information per menu item. For sit-down restaurants, the information must be provided at the table. Drive-thrus are required to have the brochures available upon request and have a notice of the availability at the point of sale. (114094)

36. EQUIPMENT, UTENSILS AND LINENS: STORAGE AND USE

POINTS 1	Compliance date not specified	Inspector Comments: Ensure pressurized cylinders are securely fastened to a rigid structure. Observed two CO2 tanks not securely fastened. Corrected on site.
	Complied on 4/29/2015 Violation Reference - HSC - 114074, 114081, 114119	

Violation Description: All clean and soiled linen shall be properly stored; non-food items shall be stored and displayed separate from food and food-contact surfaces. (114185.3 - 114185.4) Utensils and equipment shall be handled and stored so as to be protected from contamination. (114074 - 114075, 114081, 114119, 114121, 114161, 114178, 114179, 114083, 114185, 114185.2, 114185.5) Pressurized cylinders must be securely fastened to a rigid structure. (114172)

Overall Inspection Comments

"A" grade card posted.

If there are any questions, please contact Environmental Health Services or Melissa Nano at (800) 442-2283.



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Signature(s) of Acknowledgement

A handwritten signature in blue ink, appearing to be "Shawn", written over a horizontal line.

NAME: shawn
TITLE: manager