



**County of San Bernardino • Department of Public Health
Division of Environmental Health Services
COMMUNITY ENVIRONMENTAL HEALTH
CAL CODE OFFICIAL INSPECTION REPORT**

www.sbcounty.gov/dehs

(800) 442-2283

FACILITY NAME MARISCOS LICENCIADO				DATE 9/24/2012	SIGNATURE <i>Chris Nwadike</i>
LOCATION 9765 SIERRA AV K, FONTANA, CA 92335				REINSPECTION DATE 3/24/2013	PERMIT EXPIRATION 2/28/2013
MAILING ADDRESS 9765 SIERRA AV K, FONTANA, CA 92335				<input checked="" type="checkbox"/> FACILITY <input type="checkbox"/> OWNER <input type="checkbox"/> ACCOUNT REHS Chris Nwadike	
FA # FA0011336	PR # PR0005121	SR #	CO #	PE 1621	PROGRAM IDENTIFIER: None
TIME IN 14:26 PM	TIME OUT 15:30 PM	CONTACT Not Captured			SERVICE: 001 - Inspection - Routine
					RESULT: 03 - Corrective Action / No Follow up Required
					ACTION: 01 - No Further Action Required

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.

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> In = In compliance | <input type="checkbox"/> N/O = Not observed | <input type="checkbox"/> N/A = Not applicable |
| <input checked="" type="checkbox"/> COS = Corrected on-site | <input checked="" type="checkbox"/> MAJ = Major violation | <input checked="" type="checkbox"/> OUT = Out of compliance |

DEMONSTRATION OF KNOWLEDGE		COS	MAJ	OUT
<input checked="" type="checkbox"/> In	N/O 1. Demonstration of knowledge; food safety certification Food Safety Cert Name: Data not collected			2
EMPLOYEE HEALTH & HYGIENIC PRACTICES				
<input checked="" type="checkbox"/> In	2. Communicable disease; reporting, restrictions & excl		4	
<input checked="" type="checkbox"/> In	N/O 3. No discharge from eyes, nose, and mouth			2
<input checked="" type="checkbox"/> In	N/O 4. Proper eating, tasting, drinking or tobacco use			2
PREVENTING CONTAMINATION BY HANDS				
<input checked="" type="checkbox"/> In	N/O 5. Hands clean and properly washed; gloves used prop		4	2
<input checked="" type="checkbox"/> In	6. Adequate handwashing facilities supplied & accessib			2
TIME AND TEMPERATURE RELATIONSHIPS				
<input checked="" type="checkbox"/> In	N/O N/ 7. Proper hot and cold holding temperatures		4	2
<input checked="" type="checkbox"/> In	N/O N/ 8. Time as a public health control; procedures & record		4	2
<input checked="" type="checkbox"/> In	N/O N/ 9. Proper cooling methods		4	2
<input checked="" type="checkbox"/> In	N/O N/ 10. Proper cooking time & temperatures		4	
<input checked="" type="checkbox"/> In	N/O N/ 11. Proper reheating procedures for hot holding		4	
PROTECTION FROM CONTAMINATION				
<input checked="" type="checkbox"/> In	N/O N/ 12. Returned and reserve of food			2
<input checked="" type="checkbox"/> In	13. Food in good condition, safe and unadulterated		4	2
<input checked="" type="checkbox"/> In	N/O N/ 14. Food contact surfaces: clean and sanitized		4	2
Sanitizer Type: Chlorine Quaternary Ammonia Hot Water Other Sanitizer Concentration				

FOOD FROM APPROVED SOURCES		COS	MAJ	OUT
<input checked="" type="checkbox"/> In	15. Food obtained from approved source		4	
<input checked="" type="checkbox"/> In	N/O N/ 16. Compliance with shell stock tags, condition, display			2
<input checked="" type="checkbox"/> In	N/O N/ 17. Compliance with Gulf Oyster Regulations			2
CONFORMANCE WITH APPROVED PROCEDURES				
<input checked="" type="checkbox"/> In	N/ 18. Compliance with variance, specialized process, and HACCP Plan			2
CONSUMER ADVISORY				
<input checked="" type="checkbox"/> In	N/O N/ 19. Consumer advisory provided for raw or undercooked foods			2
HIGHLY SUSCEPTIBLE POPULATIONS				
<input checked="" type="checkbox"/> In	N/ 20. Licensed health care facilities/public and private schools; prohibited foods not offered		4	
WATER/HOT WATER				
<input checked="" type="checkbox"/> In	21. Hot and cold water available _____Temp		4	2
LIQUID WASTE DISPOSAL				
<input checked="" type="checkbox"/> In	22. Sewage and wastewater properly disposed		4	2
VERMIN				
<input checked="" type="checkbox"/> 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	<input checked="" type="checkbox"/> X
28. Washing fruits and vegetables	1
29. Toxic substances properly identified, stored, use	1
FOOD STORAGE/DISPLAY/SERVICE	
30. Food storage; food storage containers identified	1
31. Consumer self-service	1
32. Food properly labeled & honestly presented	1

EQUIPMENT/UTENSILS/LINENS	OUT
33. Nonfood contact surfaces clean	<input checked="" type="checkbox"/> X
34. Warewashing facilities: installed, maintained, used	1
35. Equipment/Utensils approved; installed; clean; good repa	<input checked="" type="checkbox"/> X
36. Equipment, utensils and linens: storage and use	1
37. Vending machines	1
38. Adequate ventilation and lighting; designated area	<input checked="" type="checkbox"/> X
39. Thermometers provided and accurate	1
40. Wiping cloths: properly used and stored	<input checked="" type="checkbox"/> X
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	

[EHS would appreciate your feedback on this inspection. Click here to take our survey or browse to surveymonkey.com/s/RFFSURVEY](http://www.surveymonkey.com/s/RFFSURVEY)



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Non-critical Violations

27: Food separated and protected

POINTS
1
Compliance date not specified
Not In Compliance

Violation Description: All food shall be separated and protected from contamination. (113984 (a, b, c, d, f), 113986, 114060, 114067(a, d, e, j), 114069(a, b), 114077, 114089.1 (c), 114143 (c)) All food shall be stored, prepared, displayed or held so that it is protected from contamination.

Inspector Comments: Observed food scoop handle placed on food.
Ensure that scoop handles stand above the food without touching the food

33: Nonfood-contact surfaces clean

POINTS
1
Compliance date not specified
Not In Compliance

Violation Description: All nonfood contact surfaces of utensils and equipment shall be clean. (114115 (c))

Inspector Comments: Observed dust and dirt buildup on the utensil storage shelf above the 2 compartment sink.
Provide thorough and regular cleaning.

35: Equipment/Utensils - approved; installed; clean; g

POINTS
1
Compliance date not specified
Not In Compliance

Violation Description: All utensils and equipment shall be fully operative and in good repair. (114175). All utensils and equipment shall be approved, installed properly, and meet applicable standards. (114130, 114130.1, 114130.2, 114130.3, 114130.4, 114130.5, 114132, 114133, 114137, 114139, 114153, 114155, 114163, 114165, 114167, 114169, 114177, 114180, 114182)

Inspector Comments: Observed old food scraps buildup on the can opener.
Provide thorough cleaning.
Corrected during inspection.

Observed dirt buildup inside the reach-in refrigerators.
Provide thorough and regular cleaning.

38: Adequate ventilation and lighting; designated area

POINTS
1
Compliance date not specified
Not In Compliance

Violation Description: Exhaust hoods shall be provided to remove toxic gases, heat, grease, vapors and smoke and be approved by the local building department. Canopy-type hoods shall extend 6" beyond all cooking equipment. All areas shall have sufficient ventilation to facilitate proper food storage. Toilet rooms shall be vented to the outside air by a screened openable window, an air shaft, or a light-switch activated exhaust fan, consistent with local building codes. (114149, 114149.1) Adequate lighting shall be provided in all areas to facilitate cleaning and inspection. Light fixtures in areas where open food is stored, served, prepared, and where utensils are washed shall be of shatterproof construction or protected with light shields. (114149.2, 114149.3, 114252, 114252.1)

Inspector Comments: Observed dust and smoke buildup on the air vent in the kitchen.
Provide thorough cleaning to all the air vents.

40: Wiping cloths: properly used and stored

POINTS
1
Compliance date not specified
Not In Compliance

Violation Description: Wiping cloths used to wipe service counters, scales or other surfaces that may come into contact with food shall be used only once unless kept in clean water with sanitizer. (114135, 114185.1, 114185.3 (d-e)) Sponges shall not be used in contact with cleaned and sanitized or in-use food contact surfaces. (114135)

Inspector Comments: Observed wet wiping cloths placed on various counter tops.
Place wiping cloths in sanitizing solution prior to and after each use.

Overall Inspection Comments

No summary comments have been made for this inspection.

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