



**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](http://www.sbcounty.gov/dehs)

**(800) 442-2283**

FACILITY NAME <b>ONTARIO CHRISTIAN HIGH SCHOOL</b>					DATE <b>9/25/2012</b>	SIGNATURE <i>Deborah Vandenberg</i>	
LOCATION <b>931 W PHILADELPHIA ST, ONTARIO, CA 91762</b>					REINSPECTION DATE <b>3/25/2013</b>	PERMIT EXPIRATION <b>7/31/2013</b>	
MAILING ADDRESS <b>931 W PHILADELPHIA ST, ONTARIO CA 91762-4997</b>					REHS <b>Hanan Megalla</b>		
FA # <b>FA0007135</b>	PR # <b>PR0032298</b>	SR #	CO #	PE <b>1655</b>	PROGRAM IDENTIFIER: <b>Food-School</b>		
TIME IN <b>10:01 AM</b>	TIME OUT <b>10:43 AM</b>	CONTACT <b>Not Captured</b>			SERVICE: <b>001 - Inspection - Routine</b>		
					RESULT: <b>01 - Corrective Action Not Required</b>		
					ACTION: <b>01 - No Further Action Required</b>		

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.

<b>SCORE</b>
<b>100</b>

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

In = In compliance       N/O = Not observed       N/A = Not applicable  
 COS = Corrected on-site       MAJ = Major violation       OUT = Out of compliance

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

FOOD FROM APPROVED SOURCES				COS	MAJ	OUT
In	<input type="checkbox"/> N/O	<input type="checkbox"/> N/A	15. Food obtained from approved source		4	
In	<input type="checkbox"/> N/O	<input type="checkbox"/> N/A	16. Compliance with shell stock tags, condition, display			2
In	<input type="checkbox"/> N/O	<input type="checkbox"/> N/A	17. Compliance with Gulf Oyster Regulations			2
CONFORMANCE WITH APPROVED PROCEDURES						
In	<input type="checkbox"/> N/O	<input type="checkbox"/> N/A	18. Compliance with variance, specialized process, and HACCP Plan			2
CONSUMER ADVISORY						
In	<input type="checkbox"/> N/O	<input type="checkbox"/> N/A	19. Consumer advisory provided for raw or undercooked foods			2
HIGHLY SUSCEPTIBLE POPULATIONS						
In	<input type="checkbox"/> N/O	<input type="checkbox"/> N/A	20. Licensed health care facilities/public and private schools; prohibited foods not offered		4	
WATER/HOT WATER						
In	<input type="checkbox"/> N/O	<input type="checkbox"/> N/A	21. Hot and cold water available _____Temp		4	2
LIQUID WASTE DISPOSAL						
In	<input type="checkbox"/> N/O	<input type="checkbox"/> N/A	22. Sewage and wastewater properly disposed		4	2
VERMIN						
In	<input type="checkbox"/> N/O	<input type="checkbox"/> N/A	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	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	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	1
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	

[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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**Overall Inspection Comments**

NOTE:

Letter Grade (A) posted.

E.mail: [dvandenberg2@hotmail.com](mailto:dvandenberg2@hotmail.com)

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