



**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 PAGE ONE CAFE					DATE 3/20/2013	SIGNATURE <i>Nicole Walker</i>	
LOCATION 215 C ST, ONTARIO, CA 91764					REINSPECTION DATE 9/20/2013	PERMIT EXPIRATION 1/31/2014	
MAILING ADDRESS 215 E C ST, ONTARIO CA 91764					<input type="checkbox"/> FACILITY <input type="checkbox"/> OWNER <input checked="" type="checkbox"/> ACCOUNT REHS Nicole Walker		
FA # FA0015332	PR # PR0020322	SR #	CO #	PE 1621	PROGRAM IDENTIFIER: None		
TIME IN 2:35 PM	TIME OUT 3:45 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
96

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	N/O	1. Demonstration of knowledge; food safety certification Food Safety Cert Name: Data not collected			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		+	⊗ 2
Sanitizer Type: Chlorine Quaternary Ammonia Hot Water Other Sanitizer Concentration					

FOOD FROM APPROVED SOURCES			COS	MAJ	OUT
○ In		15. Food obtained from approved source		4	
○ In	N/O	N/A			2
○ In	N/O	N/A			2
CONFORMANCE WITH APPROVED PROCEDURES					
In		○ N/A			2
CONSUMER ADVISORY					
○ In	N/O	N/A			2
HIGHLY SUSCEPTIBLE POPULATIONS					
○ In		N/A		4	
WATER/HOT WATER					
○ In		21. Hot and cold water available _____Temp		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	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	



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Critical Violations

14: Food contact surfaces: clean and sanitized

POINTS
4

Compliance date not specified
 Complied on 3/20/2013

Violation Description: All food contact surfaces of utensils and equipment shall be clean and sanitized. (113984(e), 114097, 114099.1, 114099.4, 114099.6, 114101 (b-d), 114105, 114109, 114111, 114113, 114115 (a, b, d), 114117, 114125(b), 114135, 114141)

More Information:

http://www.sbcounty.gov/dehs/Depts/EnvironmentalHealth/FormsPublications/documents/Towel_Sanitizing_solution_Eng_Spn_final_11_30_11.pdf

Inspector Comments: Observed employee wipe off soiled utensils (knives) with sanitizer wiping towel and place utensils into an empty container. Per staff, utensils stored in container for food prep services/activities.

Ensure proper ware washing activity. Proper ware washing includes the following: scrape food debris from utensils/plates, wash, rinse, sanitize, and air dry.

Non-critical Violations

Overall Inspection Comments

NOTE: A posted
 Business card provided.

NOTE: Ensure valid food handler cards and manager certificates are organized in a designated folder. Ensure food handler cards are accessible at the time of inspection for review.