



**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>CASA BLANCA RESTAURANT &amp; SPORT BAR</b>					DATE <b>4/17/2013</b>	SIGNATURE	
LOCATION <b>2347 N SIERRA WY, SAN BERNARDINO, CA 92405</b>					REINSPECTION DATE <b>10/17/2013</b>	PERMIT EXPIRATION <b>6/30/2013</b>	
MAILING ADDRESS <b>17975 MONTGOMERY AV, FONTANA CA 92336</b>					REHS <b>Chaz Harrison</b>		
FA # <b>FA0010008</b>	PR # <b>PR0002622</b>	SR #	CO #	PE <b>1622</b>	PROGRAM IDENTIFIER: None SERVICE: 001 - Inspection - Routine RESULT: 03 - Corrective Action / No Follow up Required ACTION: 01 - No Further Action Required		
TIME IN <b>12:59 PM</b>	TIME OUT <b>2:21 PM</b>	CONTACT <b>Not Captured</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.



**SCORE 94**

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
<input checked="" type="radio"/> In	N/O	1. Demonstration of knowledge; food safety certification			2
EMPLOYEE HEALTH & HYGIENIC PRACTICES					
<input checked="" type="radio"/> In		2. Communicable disease; reporting, restrictions & excl		4	
<input checked="" type="radio"/> In	N/O	3. No discharge from eyes, nose, and mouth			2
<input checked="" type="radio"/> In	N/O	4. Proper eating, tasting, drinking or tobacco use			2
PREVENTING CONTAMINATION BY HANDS					
<input checked="" type="radio"/> In	N/O	5. Hands clean and properly washed; gloves used prop		4	2
<input checked="" type="radio"/> In		6. Adequate handwashing facilities supplied & accessib			2
TIME AND TEMPERATURE RELATIONSHIPS					
<input type="radio"/> In	<input checked="" type="radio"/> N/O	7. Proper hot and cold holding temperatures		4	2
<input type="radio"/> In	<input checked="" type="radio"/> N/O	8. Time as a public health control; procedures & record		4	2
<input type="radio"/> In	<input checked="" type="radio"/> N/O	9. Proper cooling methods		4	2
<input type="radio"/> In	<input checked="" type="radio"/> N/O	10. Proper cooking time & temperatures		4	
<input type="radio"/> In	<input checked="" type="radio"/> N/O	11. Proper reheating procedures for hot holding		4	
PROTECTION FROM CONTAMINATION					
<input checked="" type="radio"/> In	N/O	12. Returned and reserve of food			2
<input checked="" type="radio"/> In		13. Food in good condition, safe and unadulterated		4	2
<input type="radio"/> In	N/O	14. Food contact surfaces: clean and sanitized	<input checked="" type="checkbox"/> COS	<input checked="" type="checkbox"/> MAJ	2

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



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**14. FOOD CONTACT SURFACES: CLEAN AND SANITIZED** **⚠ CRITICAL ⚠**

<b>POINTS</b> <b>4</b>	Compliance date not specified	<b>Inspector Comments:</b> Observed ice scoop on top of ice machine. Top of ice machine contained grime build up. Ensure to store ice machine in a clean and sanitary environment.
	Complied on 4/17/2013	

**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](http://www.sbcounty.gov/dehs/Depts/EnvironmentalHealth/FormsPublications/documents/Towel_Sanitizing_solution_Eng_Spn_final_11_30_11.pdf)

**29. TOXIC SUBSTANCES PROPERLY IDENTIFIED, STORED, USED**

<b>POINTS</b> <b>1</b>	Compliance date not specified	<b>Inspector Comments:</b> Observed gasoline container that was half filled with gasoline stored next to clean utensils. Ensure to store chemicals in a manner that would prevent cross contamination.
	Not In Compliance	

**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.

**41. PLUMBING; PROPER BACKFLOW DEVICES**

<b>POINTS</b> <b>1</b>	Compliance date not specified	<b>Inspector Comments:</b> Observed no backflow prevention device on mop sink. Ensure to store a backflow prevention device on mop sink to prevent contamination of potable water.
	Not In Compliance	

Observed Home Defense Pesticide in facility. Discontinue the practice of applying pesticide in facility. Ensure to hire a license contractor.

**Violation Description:** The potable water supply shall be protected with a backflow or back siphonage protection device, as required by applicable plumbing codes. (114192) All plumbing and plumbing fixtures shall be installed in compliance with local plumbing ordinances, shall be maintained so as to prevent any contamination, and shall be kept clean, fully operative, and in good repair. Any hose used for conveying potable water shall be of approved materials, labeled, properly stored, and used for no other purpose. (114171, 114189.1, 114190, 114193, 114193.1, 114199, 114201, 114269)

**49. PERMITS AVAILABLE**

<b>POINTS</b> <b>0</b>	Comply by 4/18/2013	<b>Inspector Comments:</b> Ensure to obtain a valid health permit within 3 business days. Failure to obtain a valid health permit will result in closure of the facility.
	Not In Compliance	

**Violation Description:** A food facility shall not be open for business without a valid permit. (114067(b) & (c), 114381 (a), 114381.2, 114387)

**Overall Inspection Comments**

"A" placard posted.

Contact Chaz Harrison at 1800-442-2283 with any questions.  
 Our food worker Training Certification is now available online! Get your County approved food worker card at <http://www.sbcfoodworker.com>

Do not move, relocate, or remove grade card. Failure to comply will result in a charged inspection at an hourly rate of \$245