



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

**(800) 442-2283**

[www.sbcounty.gov/dph/dehs](http://www.sbcounty.gov/dph/dehs)

FACILITY NAME <b>R K ICE CREAM</b>					DATE 1/14/2015	SIGNATURE	
LOCATION 1184 W BASELINE AV, SAN BERNARDINO, CA 92411					REINSPECTION DATE 7/14/2015	PERMIT EXPIRATION 12/31/2014	
MAILING ADDRESS PO BOX 3048, VICTORVILLE CA 92393					<input type="checkbox"/> FACILITY <input type="checkbox"/> OWNER <input checked="" type="checkbox"/> ACCOUNT REHS <b>Melissa Nano</b>		
FA # FA0000237	PR # PR0012978	SR #	CO #	PE 1341	PROGRAM IDENTIFIER: 1200670 deCAL-1402951-2014		
TIME IN 8:30 AM	TIME OUT 8:56 AM	CONTACT Not Captured		SERVICE: 001 - Inspection - Routine			
					RESULT: 01 - Corrective Action Not 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 100**

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			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			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		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	



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

(800) 442-2283

[www.sbcounty.gov/dph/dehs](http://www.sbcounty.gov/dph/dehs)

FACILITY NAME <b>R K ICE CREAM</b>	DATE 1/14/2015	SIGNATURE
LOCATION 1184 W BASELINE AV, SAN BERNARDINO, CA 92411	REHS Melissa Nano	

**⚠ CRITICAL ⚠**

<b>POINTS</b> <b>0</b>	Compliance date not specified	<b>Inspector Comments:</b>  _____
	Not In Compliance	

**Overall Inspection Comments**

No major violations observed.  
 December 2015 Decal placed on vehicle.

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