



## RETAIL FOOD PROTECTION - OFFICIAL INSPECTION REPORT

FACILITY NAME CHULA LINDA MEXICAN		DATE 9/10/2015	REINSPECTION DATE Not Specified	PERMIT EXPIRATION 6/30/2015
LOCATION 1024 E 4TH ST, ONTARIO, CA 91764			INSPECTOR Robert Adams	
MAILING ADDRESS 16700 MARYGOLD AV, FONTANA CA 92335			IDENTIFIER: None	
<input type="checkbox"/> FACILITY <input type="checkbox"/> OWNER <input checked="" type="checkbox"/> ACCOUNT			SERVICE: 006 - FIELD CONSULTATION	
TIME IN 11:00 AM	TIME OUT 12:40 PM	FACILITY ID FA0009763	RELATED ID PR0012862	PE 1621
RESULT: 05 - CORRECTIVE ACTION / FOLLOW UP REQU				
ACTION: 13 - PERMIT SUSPENDED / FACILITY CLOSED				

### RETAIL FOOD PROTECTION - Public Eating PI (25-99 Seats)

#### 16K998 Consultation Inspection

Compliance Date: Not Specified

Not In Compliance

Reference - HSC

**Inspector Comments:** Consultation inspection conducted this date. Facility is operating as of 3 weeks ago without a health permit. The district inspector required the owner to obtain a transfer of ownership by submitting the required form within 72 hours. The form was not due yet by the time of this consultation inspection. The consultation inspection was conducted for free to evaluate the risk of continued operations and to advise the customer on the minimum required equipment for a full food preparation mexican food facility.

Observed 1 three compartment sink. No preparation sink, hand sink, and no mop sink. Observed household chest freezer in use and a nonfunctional 2 door freezer stored in the back. Operator stated the three compartment sink is used for prep, thawing, hand ashing, ware washing, and disposal of mop water. Facility is unsafe to operate without a minimum upgrade to the below mentioned items.

The minimum required equipment is as follows:

1 hand wash sink within the preparation ara.

1 preparation sink with integral drain board or adjacent prep table. The prep sink must be drained indirectly to the floor sink located on the opposite side of the wall in which the three compartment sink is currently installed. Re-plumb three compartment sink to the floor sink as described above.

Provide at least 1 one door freezer.

Provide a mop sink within the facility.

Upgrade water heat to a 43,000 BTU Water heater. Facility has an existing 36,000 BTU Residential water heater.

Ensure the above equipment is NSF approved.

Provide FRP behind all newly installed sinks. FRP shall extend from the top edge of the base cove to a height of 4 feet on the wall.

Remove fly paper and other fly abatement products in the food preparation area.

Ensure all employees possess valid San Bernardino County Food Handlers Cards.

**Description:** A consultation inspection was conducted on this date.

#### 16K054 Permit Suspension



Compliance Date: Not Specified

Not In Compliance

Violation Reference - HSC - 114409, 114405

**Inspector Comments:** Food facility does not have the needed basic equipment to operate safely at this time. Facility is closed pending the upgraded equipment listed on this report. For reinspection please contact Robert Adams at 800-442-2283 once all corrections are made. Posted facility closure sign this date. Said reinspection to reopen will be conducted for free. If any additional inspections occur on this matter, including but not limited to complaints and closures prior to reopening, will be charged at the rate of \$245.00 hour with a minimum of 1/2 hour of time.

Once reopened the facility will be required to fill out a health permit application and pay a fee of \$497.00 for the health permit. The operator will also need to submit plans to EHS for plan review within 30 days of reopening.

**Violation Description:** If an imminent health hazard is found, an enforcement officer may temporarily suspend the permit and order the food facility immediately closed. (114409, 114405)

#### Overall Inspection Comments

No summary comments have been made for this inspection.

#### Signature(s) of Acknowledgement



**Public Health**  
Environmental Health Services

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

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<small>LOCATION</small> 1024 E 4TH ST, ONTARIO, CA 91764	<small>INSPECTOR</small> Robert Adams

NAME:  
TITLE:

**Total # of Images: 0**