



CAL CODE OFFICIAL INSPECTION REPORT

FACILITY NAME KIOWA MARKET		DATE 1/11/2019	REINSPECTION DATE Next Routine	PERMIT EXPIRATION 1/31/2019
LOCATION 12165 KIOWA RD 1, APPLE VALLEY, CA 92308			INSPECTOR Dawn LaFlower	
MAILING ADDRESS 12165 KIOWA RD 1, APPLE VALLEY CA 92308			IDENTIFIER: None	
			SERVICE: 001 - Inspection - Routine	
			RESULT: 03 - Corrective Action / No Follow up Required	
			ACTION: 01 - No Further Action Required	
TIME IN 9:19 AM	TIME OUT 9:51 AM	FACILITY ID FA0008330	RELATED ID PR0012524	PE 1683

Based on an inspection this day, the items marked below identify the violation(s) in operation or facilities which must be corrected. Failure to correct listed violation(s) prior to the designated compliance date may necessitate an additional inspection to be billed at the hourly rate as provided in the San Bernardino County Code [Schedule of Fees](#).

Administrative Order to Show Cause (OSC): 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; otherwise the right to a hearing shall be deemed waived.



SCORE 97

Reduce food loss, and feed those in need by donating your surplus food. [Learn more about donating surplus food.](#)

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 checked="" type="radio"/> In	N/O N/A 7. Proper hot and cold holding temperatures		4	2
<input type="radio"/> In	N/O <input checked="" type="radio"/> N/A 8. Time as a public health control; procedures & record		4	2
<input type="radio"/> In	N/O <input checked="" type="radio"/> N/A 9. Proper cooling methods		4	2
<input type="radio"/> In	N/O <input checked="" type="radio"/> N/A 10. Proper cooking time & temperatures		4	
<input type="radio"/> In	N/O <input checked="" type="radio"/> N/A 11. Proper reheating procedures for hot holding		4	
PROTECTION FROM CONTAMINATION				
<input type="radio"/> In	N/O <input checked="" type="radio"/> N/A 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 <input checked="" type="radio"/> N/A 14. Food contact surfaces: clean and sanitized		4	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 <input checked="" type="radio"/> N/A 16. Compliance with shell stock tags, condition, display			2
<input type="radio"/> In	N/O <input checked="" type="radio"/> N/A 17. Compliance with Gulf Oyster Regulations			2
CONFORMANCE WITH APPROVED PROCEDURES				
<input type="radio"/> In	<input checked="" type="radio"/> N/A 18. Compliance with variance, specialized process, and HACCP Plan			2
CONSUMER ADVISORY				
<input type="radio"/> In	N/O <input checked="" type="radio"/> N/A 19. Consumer advisory provided for raw or undercooked foods			2
HIGHLY SUSCEPTIBLE POPULATIONS				
<input type="radio"/> In	<input checked="" type="radio"/> N/A 20. Licensed health care facilities/public and private schools; prohibited foods not offered		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	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	<input checked="" type="checkbox"/> 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
38. Adequate ventilation and lighting; designated area	<input checked="" type="checkbox"/> 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"/> 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 handler cards	3
COMPLIANCE & ENFORCEMENT	
49. Permits Available	
50. Restrooms Required	
51. Plan Review	
52. VC&D	
53. Impoundment	
54. Permit Suspension	



CAL CODE OFFICIAL INSPECTION REPORT

FACILITY NAME KIOWA MARKET	DATE 1/11/2019
LOCATION 12165 KIOWA RD 1, APPLE VALLEY, CA 92308	INSPECTOR Dawn LaFlower

33. NONFOOD-CONTACT SURFACES CLEAN

POINTS 1	Compliance date not specified	Inspector Comments: Dust accumulation observed on the fan covers in the walk in refrigerator. Clean and maintain equipment in clean condition and good repair.
	Not In Compliance Violation Reference - HSC - 114115 (c)	

Violation Description: All nonfood contact surfaces of utensils and equipment shall be clean. (114115 (c))

38. ADEQUATE VENTILATION AND LIGHTING; DESIGNATED AREA

POINTS 1	Compliance date not specified	Inspector Comments: Light cover in the left walk in refrigerator observed filled up with condensation. Remove condensation and replace light bulb to provide sufficient lighting.
	Not In Compliance Violation Reference - HSC - 114149, 114149.1	

Violation Description: Exhaust hoods shall be provided to remove toxic gases, heat, grease, vapors and smoke and be approved by the local building department. Canopy-type hoods shall extend 6" beyond all cooking equipment. All areas shall have sufficient ventilation to facilitate proper food storage. Toilet rooms shall be vented to the outside air by a screened openable window, an air shaft, or a light-switch activated exhaust fan, consistent with local building codes. (114149, 114149.1) Adequate lighting shall be provided in all areas to facilitate cleaning and inspection. Light fixtures in areas where open food is stored, served, prepared, and where utensils are washed shall be of shatterproof construction or protected with light shields. (114149.2, 114149.3, 114252, 114252.1)

41. PLUMBING; PROPER BACKFLOW DEVICES

POINTS 1	Compliance date not specified	Inspector Comments: Debris build up observed in the floor sink next to the back door. Clean and maintain in clean condition.
	Not In Compliance Violation Reference - HSC - 114171, 114189.1	

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)

IMPORTANT: Risk Based Inspection Frequency

Food facilities that pose a higher risk level for causing foodborne illness will be subject to an additional inspection, to be billed at the hourly rate as provided in the San Bernardino County Code [Schedule of Fees](#). Facilities that received one or more of the following will be elevated to a high risk tier:

- A score letter of "C" or lower on one of the last two graded inspections,
- A score letter of "B" on two of the last three graded inspections,
- Repeated "four (4) point violation Risk Factor" (critical violation codes 1-23) on the last two inspections, or
- Four (4) or more critical violations (codes 1-23) noted during an inspection, or
- A permit suspension (closure) on your last graded inspection.

Overall Inspection Comments

"A" grade placard posted.

Signature(s) of Acknowledgement

NAME: Farid
TITLE: Owner/Operator