385 N. Arrowhead Ave. 2nd Floor, San Bernardino, CA 92415-0160 | Phone: 800.442.2283 Fax: 909.387.4323
www.SBCounty.gov

SAN BERNARDINO COUNTY

# Public Health

## Environmental Health Services

## CAL CODE OFFICIAL INSPECTION REPORT

| FACILITY NAME | DATE | REINSPECTION DATE | PERMIT EXPIRATION |
|---|---|---|---|
| STARBUCKS COFFEE 669 | 3/13/2015 | 9/13/2015 | 8/31/2015 |

| LOCATION | INSPECTOR |
|---|---|
| 9015 CENTRAL AV A, MONTCLAIR, CA 91763 | Nicole Walker |

MAILING ADDRESS: PO BOX 34442 TAX 2, SEATTLE WA 98124 ☐FACILITY ☐OWNER ☑ACCOUNT

IDENTIFIER: Food
SERVICE: 001 - Inspection - Routine
RESULT: 03 - Corrective Action / No Follow up Required
ACTION: 01 - No Further Action Required

| TIME IN | TIME OUT | FACILITY ID | RELATED ID | PE |
|---|---|---|---|---|
| 4:10 PM | 4:50 PM | FA0004616 | PR0010509 | 1620 |

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.

**A**

**SCORE 99**

**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 |
|---|---|---|---|---|
| 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 | **7.** Proper hot and cold holding temperatures | | 4 | 2 |
| In N/O N/A | **8.** Time as a public health control; procedures & record | | 4 | 2 |
| In N/O N/A | **9.** Proper cooling methods | | 4 | 2 |
| In N/O N/A | **10.** Proper cooking time & temperatures | | 4 | |
| In N/O N/A | **11.** Proper reheating procedures for hot holding | | 4 | |
| | **PROTECTION FROM CONTAMINATION** | | | |
| In N/O N/A | **12.** Returned and reservice of food | | | 2 |
| In | **13.** Food in good condition, safe and unadulterated | | 4 | 2 |
| In N/O N/A | **14.** Food contact surfaces: clean and sanitized | | 4 | 2 |

| | FOOD FROM APPROVED SOURCES | COS | MAJ | OUT |
|---|---|---|---|---|
| In | **15.** Food obtained from approved source | | 4 | |
| In N/O N/A | **16.** Compliance with shell stock tags, condition, display | | | 2 |
| In N/O N/A | **17.** Compliance with Gulf Oyster Regulations | | | 2 |
| | **CONFORMANCE WITH APPROVED PROCEDURES** | | | |
| In N/A | **18.** Compliance with variance, specialized process, and HACCP Plan | | | 2 |
| | **CONSUMER ADVISORY** | | | |
| In N/O N/A | **19.** Consumer advisory provided for raw or undercooked foods | | | 2 |
| | **HIGHLY SUSCEPTIBLE POPULATIONS** | | | |
| In N/A | **20.** Licensed health care facilities/public and private schools; prohibited foods not offered | | 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 | |

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## 27. FOOD SEPARATED AND PROTECTED

| POINTS | |
|---|---|
| 1 | **Compliance date not specified**<br>**Not In Compliance**<br>**Violation Reference - HSC - 113984 (a, b, c, d, f)** |

**Inspector Comments:** Store employee food at a designated location. Observed personal food not stored at a designated location.

**Violation Description:** All food shall be separated and protected from contamination. (113984 (a, b, c, d, f), 113986, 114060, 114067(a, d, e, j), 114069(a, b), 114077, 114089.1 (c), 114143 (c)) All food shall be stored, prepared, displayed or held so that it is protected from contamination.

## Overall Inspection Comments

Letter A posted
Business card provided

## Signature(s) of Acknowledgement

SDA

NAME:
TITLE: