

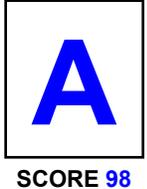


Public Health
Environmental Health Services
CAL CODE OFFICIAL INSPECTION REPORT

| | | | | |
|---|-----------------------------|---------------------------------|--|--|
| FACILITY NAME LAS CONCHITAS BAKERY | | DATE 11/10/2015 | REINSPECTION DATE Next Routine | PERMIT EXPIRATION 11/30/2015 |
| LOCATION 18150 ARROW BL I, FONTANA, CA 92335 | | | INSPECTOR Isaac Gebreslassie | |
| MAILING ADDRESS 18150 ARROW BL I, FONTANA, CA 92335 | | | IDENTIFIER: None | |
| TIME IN 10:16 AM | TIME OUT 11:24 AM | FACILITY ID FA0006656 | RELATED ID PR0013135 | PE 1619 |
| | | | SERVICE: 001 - Inspection - Routine RESULT: 03 - Corrective Action / No Follow up 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. Failure to correct listed violation(s) prior to the designated compliance date may necessitate an additional reinspection at a charge of \$4.08 per 1 minute with a minimum time of 30 minutes, and a minimum charge of \$122.50.

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.



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 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 reserve 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 | ⊘ |
| 48. Food handler 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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38. ADEQUATE VENTILATION AND LIGHTING; DESIGNATED AREA

| | | |
|--------------------|---|---|
| POINTS 1 | Compliance date not specified | Inspector Comments: Observed dust buildup on exhaust hood filters. Clean and maintain the same. |
| | 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)

47. SIGNS POSTED; LAST INSPECTION REPORT AVAILABLE

| | | |
|--------------------|---|--|
| POINTS 1 | Compliance date not specified | Inspector Comments: Observed last routine inspection report missing. Keep last inspection report on site at all times. |
| | Not In Compliance Violation Reference - HSC - 113725.1, 113953.5 | |

Violation Description: Handwashing signs shall be posted in each toilet room, directing attention to the need to thoroughly wash hands after using the restroom (113953.5) (b) No smoking signs shall be posted in food preparation, food storage, warewashing, and utensil storage areas (113978). (c) Consumers shall be notified that clean tableware is to be used when they return to self-service areas such as salad bars and buffets. (d) Any food facility constructed before January 1, 2004 without public toilet facilities, shall prominently post a sign within the food facility in a public area stating that toilet facilities are not provided (113725.1, 114381 (e)). A sign shall be posted stating that a copy of the most recent routine inspection report is available upon request. (113725.1) Permit shall be posted in conspicuous location. (114381(e)) Letter Grade Placecard shall be properly posted. SBCC 33.1406

Overall Inspection Comments

No summary comments have been made for this inspection.

Signature(s) of Acknowledgement

NAME: Yolanda
 TITLE: owner