



CAL CODE OFFICIAL INSPECTION REPORT

FACILITY NAME WALMART #1862		DATE 12/1/2015	REINSPECTION DATE Next Routine	PERMIT EXPIRATION 1/31/2016
LOCATION 1610 S RIVERSIDE AV, RIALTO, CA 92376			INSPECTOR Patrick Baccari	
MAILING ADDRESS 702 SW 8TH ST, BENTONVILLE AR 72716-0500			IDENTIFIER: None	
			SERVICE: 001 - Inspection - Routine	
			RESULT: 03 - Corrective Action / No Follow up Required	
			ACTION: 01 - No Further Action Required	
TIME IN 12:55 PM	TIME OUT 1:56 PM	FACILITY ID FA0003041	RELATED ID PR0009231	PE 1611

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](#).



SCORE 98

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		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				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				4	2
LIQUID WASTE DISPOSAL					
○ In				4	2
VERMIN					
○ In				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 handler cards	2
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 WALMART #1862	DATE 12/1/2015
LOCATION 1610 S RIVERSIDE AV, RIALTO, CA 92376	INSPECTOR Patrick Baccari

6. ADEQUATE HANDWASHING FACILITIES SUPPLIED & ACCESSIBLE

POINTS 2	Compliance date not specified	Inspector Comments: Observed paper towels were in dispenser at the hand wash sink in employee restroom, but they would not dispenses as intended. Maintain soap and paper towels in operable wall mounted dispensers at hand wash sinks.
	Not In Compliance	
	Violation Reference -	

Violation Description: Handwashing soap and towels or drying device shall be provided in dispensers; dispensers shall be maintained in good repair. (113953.2) Adequate facilities shall be provided for hand washing. (113953, 113953.1, 114067(f)). Handwashing sink is not separated from a warewashing sink by a 6 inch high metal splashguard or 24 inch separation. (113953) Handwashing sinks shall not be obstructed, inaccessible, used improperly or kept unclean. (113953.1)

Overall Inspection Comments

No summary comments have been made for this inspection.

Signature(s) of Acknowledgement

NAME: lupita ramirez
TITLE: