



**Public Health**  
**Environmental Health Services**  
**CAL CODE OFFICIAL INSPECTION REPORT**

FACILITY NAME YUCAIPA COMMUNITY CENTER		DATE 3/18/2015	REINSPECTION DATE Next Routine	PERMIT EXPIRATION 8/31/2015
LOCATION 12202 1ST ST, YUCAIPA, CA 92399			INSPECTOR Tia Wilson	
MAILING ADDRESS 21250 BOX SPRINGS RD STE 101, MORENO VALLEY CA 92557			IDENTIFIER: None	
TIME IN 2:10 PM			SERVICE: 001 - Inspection - Routine	
TIME OUT 3:26 PM			RESULT: 03 - Corrective Action / No Follow up Required	
FACILITY ID FA0007794			ACTION: 01 - No Further Action Required	
RELATED ID PR0006128			PE 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.



**SCORE 98**

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/A	3. No discharge from eyes, nose, and mouth			2
In	N/A	4. Proper eating, tasting, drinking or tobacco use			2
PREVENTING CONTAMINATION BY HANDS					
In	N/A	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/A			4	
In	N/A			4	
PROTECTION FROM CONTAMINATION					
In	N/A				2
In		13. Food in good condition, safe and unadulterated		4	2
In	N/A			4	

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		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	⊘
35. Equipment/Utensils approved; installed; clean; good repa	⊘
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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**34. WAREWASHING FACILITIES: INSTALLED, MAINTAINED, USED; TEST STRIPS**

<b>POINTS</b> <span style="font-size: 2em; color: red;">1</span>	Compliance date not specified Not In Compliance Violation Reference - HSC - 114067(f,g), 114099	<b>Inspector Comments:</b> Observed sanitizer level at automatic dishwasher measuring 0 ppm chlorine after operating hours. Observed manufacturer specifications require minimum 50 ppm chlorine. Active warewashing not observed.  Ensure that dishwasher is operating in accordance to manufacturer specifications. Discontinue use of automatic dishwasher and use 3-compartment sink until repaired.
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**Violation Description:** Food facilities that prepare food shall be equipped with warewashing facilities. Testing equipment and materials shall be provided to measure the applicable sanitization method. (114067(f,g), 114099, 114099.3, 114099.5, 114101(a), 114101.1, 114101.2, 114103, 114107, 114125) A thermometer must be readily available to monitor the temperature of the water at the warewashing sink. A warewashing sink used to wash wiping cloths, wash produce, or thaw food must be cleaned and sanitized before and after each use.

**More Information:** [http://www.sbcounty.gov/uploads/dph/dehs/Depts/EnvironmentalHealth/FormsPublications/Three\\_Comp\\_Sink\\_Eng\\_Spn\\_final\\_11\\_30\\_11.pdf](http://www.sbcounty.gov/uploads/dph/dehs/Depts/EnvironmentalHealth/FormsPublications/Three_Comp_Sink_Eng_Spn_final_11_30_11.pdf)

**35. EQUIPMENT/UTENSILS - APPROVED; INSTALLED; CLEAN; GOOD REPAIR, CAPACITY**

<b>POINTS</b> <span style="font-size: 2em; color: red;">1</span>	Compliance date not specified Not In Compliance Violation Reference - HSC - 114130, 114130.1, 114130	<b>Inspector Comments:</b> Observed ice buildup in freezer.  Repair or replace freezer. Operator plans to install new freezer.
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**Violation Description:** All utensils and equipment shall be fully operative and in good repair. (114175). All utensils and equipment shall be approved, installed properly, and meet applicable standards. (114130, 114130.1, 114130.2, 114130.3, 114130.4, 114130.5, 114132, 114133, 114137, 114139, 114153, 114155, 114163, 114165, 114167, 114169, 114177, 114180, 114182)

**Overall Inspection Comments**

"A" grade posted.

**Signature(s) of Acknowledgement**

NAME: Patty Lewis  
 TITLE: Manager