

Phone: 657-278-7233 | Email: safety@fullerton.edu | Website: ehs.fullerton.edu

RETAIL FOOD FACILITY INSPECTION REPORT

FACILITY NAME		OPERATOR	Permit No.
Starbucks - CBE		CSU Fullerton Auxiliary Services	25-24
FACILITY LOCATION			INSPECTOR
800 N. State College Blvd., Mi	haylo Hall, Fullerton, CA 9283	1	Karen Vu
FOOD MANAGER / CERTIFICATE EXPIRATION DATE		PERSON IN CHARGE / TITLE	
Christianne Pantoja, 01/13/202	28		
INSPECTION DATE	INSPECTION TYPE	RE-INSPECTION Date	INSPECTION RESULTS
09/23/2025	Routine		Pass

Based on an inspection this day, the compliance status (IN, MAJ, MIN, OUT, N/A, N/O, COS) has been identified below. Violations noted as MAJ, MIN or OUT must be corrected. Failure to correct the listed violation(s) prior to the designated compliance date may necessitate a reinspection at an additional fee. See the following page(s) for the applicable code sections and the general requirements that correspond to the violation(s) noted below.

IN = In Compliance N/A = Not Applicable N/O = Not Observed MAJ = Major MIN = Minor OUT = Out of Compliance COS = Corrected on Site

Critical Risk Factors

IN	MAJ	MIN	N/A	N/O	Violation	cos	IN	MAJ	MIN	N/A	N/O	Violation COS	
EMPLOYEE KNOWLEDGE				PROTECTION FROM CONTAMINATION									
X	X 1. Demonstration of knowledge, food safety certification			Χ					14. Food contact surfaces clean and sanitized				
EMPLOYEE HEALTH AND HYGENIC PRACTICES							Χ		14A. Sanitizer type is Chlorine				
Х					2. Communicable diseases: reporting, restrictions, and exclusions		Χ					14B. Sanitizer type is Quaternary Ammonium	
X					No discharge from eyes, nose, or mouth					Х		14C. Sanitizer type is Iodine	
X					4. Proper eating,tasting, drinking or tobacco use		X					14D. Sanitizer type is Hot Water	
				С	ONTAMINATION BY HANDS	'				F	00[FROM APPROVED SOURCES	
Х					5. Hands clean and properly washed, gloves used properly		Χ					15. Food Obtained from approved source	
X					Adequate hand washing facilities supplied and					Х		16. Compliance with shell stock tags, condition, display	
	accessible.						Х		17. Compliance with Gulf Oyster Regulations				
TIME AND TEMPERATURE RELATIONSHIPS 7A. Proper hot holding temperatures.					CONFORMANCE WITH APPROVED PROCEDURES								
X					7B. Proper cold holding temperatures.					Х		18. Compliance with variance, specialized process and HACCP plan	
7			X 8. Times as a public health control; procedures						CONSUMER ADVISORY				
X					and records 9. Proper cooling methods					Χ		19. Consumer advisory provided for raw or undercooked foods	
X					10. Proper Cooking time and temperature					Χ		20. Licensed health care facilities/public and private schools: prohibited foods not offered	
X	X 11. Proper reheating procedures for hot holding WATER/HOT WATER												
PROTECTION FROM CONTAMINATION			•	X					21. Hot and cold water available				
X					12. Return and re-service of food		Х					22. Sewage and wastewater properly disposed	
X					13. Food in good condition, safe, and unadulterated		VERMIN						
							Χ					23. No rodents, insects, birds, or animals	

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Good Retail Practices

OUT	Violation	Violation COS OUT Violation		cos	OUT	Violation	cos	
	SUPERVISION			EQUIPMENT/UTENSILS/LINENS			PHYSICAL FACILITIES	
	24. Person in charge present and performs duties			33. Nonfood contact surfaces clean			43. Toilet facilities: properly constructed, supplied, cleaned	
	25. Personal cleanliness and hair restraints			34. Ware washing facilities: installed, maintained, used, test strips			44. Premises, personal/cleaning items, vermin proofing	
GE	NERAL FOOD SAFETY REQUIREMEN	ITS	Χ	35. Equipment/utensils approved, installed,			PERMANENT FOOD FACILITIES	
	26. Approved thawing methods used, frozen food			clean, good repair, capacity 36. Equipment, utensils, and linens: storage and use		Х	45. Floor, walls, and ceilings: built, maintained, and cleaned	
	27. Food separated and protected			37. Vending Machines			46. No unapproved private homes/living or sleeping quarters	
	28. Washing fruits and vegetables			38. Adequate ventilation and lighting,			SIGNS/REQUIREMENTS	
	29. Toxic substances properly identified, stored, used			designated areas, use 39. Thermometers provided and accurate		47. Signs posted, last inspection report available, placard posted		
	FOOD STORAGE/DISPLAY/SERVICE		33. The mometers provided and accurate			COMPLIANCE ENFORCEMENT		
	30. Food storage, food storage containers			40. Wiping cloths: properly used and stored		48. Plan review		
	identified			PHYSICAL FACILITIES			49. Permits available	
	31. Consumer self-service			41. Plumbing: proper backflow devices				
	32. Food properly labeled and honestly		-	10.0.1			50. Impoundment	
	presented	42. Garbage and refuse properly disposed of, facilities maintained				51. Permit Suspension		

Opening Comments

A routine inspection was conducted this date for Starbucks- CBE.

The following was observed/discussed during the inspection:

- Observed several temporary air conditioning units throughout the facility.

The facility has been operating with the temporary air conditioning units for over a year.

Per employees, if the facility does not turn on the temporary air conditioning units, the ambient air within the facility is uncomfortably hot.

Facility shall determine a permanent fix for the ambient temperature within this space to ensure employees are operating at a comfortable temperature.

The facility shall contact CSUF EHS to discuss a plan to make the necessary repairs.

- Observed a water softener system installed directly in front of the electrical panel. Relocate the water softener system. A minimum of 30 inches in width and 36 inches in depth is required in addition to a clear pathway to the electrical equipment. Measurements are calculated from the front of the panel.
- Observed an upright refrigerator and dry storage rack next to the transformer. In addition, shelving was on top of the transformer. Relocate the refrigerator, dry storage rack, and shelving to provide a minimum clearance of 36 inches around the transformer in addition to a clear pathway to the equipment.

A transformer requires adequate clearance for airflow.

35. Equipment/utensils approved, installed, clean, good repair, capacity

All utensils and equipment shall be approved, fully operative, and in good repair. (114130, 114130.1, 114130.2, 114130.3, 114130.5, 114130.6, 114132, 114133, 114137, 114139, 114153, 114155, 114165, 114165, 114167, 114169, 114175, 114177, 114180, 114182)

Inspector Comments: Observed torn gasket on the 2 door freezer in the back kitchen. Replace torn gasket.

45. Floor, walls, and ceilings: built, maintained, and cleaned

Food facility shall be fully enclosed. Walls, floors, and ceilings shall be approved and in good repair. (114143(d), 114266, 114268, 114268.1, 114271, 114272)

Inspector Comments: 1. Observed dust on the air vents throughout the facility. Clean and maintain the air vents in clean and in good condition at all times.

2. Observed a gap around the temporary vent tube into the ceiling. Seal the gap around the temporary vent tube.



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It was agreed that a copy of this report will be sent to the email address on file. The person in charge was directed to call this office if the report is not received within two business days. Additional information can be found at www.ehs.fullerton.edu

