



# CALIFORNIA STATE UNIVERSITY, FULLERTON

Division of Administration & Finance

Capital Programs & Facilities Management, Environmental Health & Safety

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## RETAIL FOOD FACILITY INSPECTION REPORT

|   |                            |   |                            |                               |
|---|----------------------------|---|----------------------------|-------------------------------|
| FACILITY NAME<br>Gastronome - Pizza/Deli  |                            | OPERATOR<br>Aramark Services, Inc.                            |                            | Permit No.<br>19-14           |
| FACILITY LOCATION<br>800 N. State College Blvd., Student Housing, Fullerton, CA 92831 |                            |   |                            | INSPECTOR<br>Justine Baldacci |
| FOOD MANAGER / CERTIFICATE EXPIRATION DATE<br>Jonathan Cheng, 2/2/2024                |                            | PERSON IN CHARGE / TITLE<br>Ali Hamze / Food Service Director |                            |                               |
| INSPECTION DATE<br>12/18/2019   | INSPECTION TYPE<br>Routine | RE-INSPECTION Date<br>04/18/2020                              | INSPECTION RESULTS<br>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 |
|--|-----|-----|-----|-----|--|-----|
| <b>EMPLOYEE KNOWLEDGE</b>                    |     |     |     |     |  |     |
| •  |     |     |     |     | 1. Demonstration of knowledge, food safety certification                                     |     |
| <b>EMPLOYEE HEALTH AND HYGENIC PRACTICES</b> |     |     |     |     |  |     |
| •  |     |     |     |     | 2. Communicable diseases: reporting, restrictions, and exclusions                            |     |
| •  |     |     |     |     | 3. No discharge from eyes, nose, or mouth  |     |
| •  |     |     |     |     | 4. Proper eating, tasting, drinking or tobacco use   |     |
| <b>CONTAMINATION BY HANDS</b>                |     |     |     |     |  |     |
| •  |     |     |     |     | 5. Hands clean and properly washed, gloves used properly                                     |     |
| •  |     |     |     |     | 6. Adequate hand washing facilities supplied and accessible.                                 |     |
| <b>TIME AND TEMPERATURE RELATIONSHIPS</b>    |     |     |     |     |  |     |
| •  |     |     |     |     | 7A. Proper hot holding temperatures.   |     |
| •  |     |     |     |     | 7B. Proper cold holding temperatures.  |     |
|  |     |     | •   |     | 8. Times as a public health control; procedures and records                                  |     |
|  |     |     | •   |     | 9. Proper cooling methods  |     |
|  |     |     | •   |     | 10. Proper Cooking time and temperature  |     |
|  |     |     | •   |     | 11. Proper reheating procedures for hot holding  |     |
| <b>PROTECTION FROM CONTAMINATION</b>         |     |     |     |     |  |     |
| •  |     |     |     |     | 12. Return and re-service of food  |     |
| •  |     |     |     |     | 13. Food in good condition, safe, and unadulterated  |     |
| <b>PROTECTION FROM CONTAMINATION</b>         |     |     |     |     |  |     |
| •  |     |     |     |     | 14. Food contact surfaces clean and sanitized  |     |
|  |     |     | •   |     | 14A. Sanitizer type is Chlorine  |     |
| •  |     |     |     |     | 14B. Sanitizer type is Quaternary Ammonium   |     |
|  |     |     | •   |     | 14C. Sanitizer type is Iodine  |     |
|  |     |     | •   |     | 14D. Sanitizer type is Hot Water   |     |
| <b>FOOD FROM APPROVED SOURCES</b>            |     |     |     |     |  |     |
| •  |     |     |     |     | 15. Food Obtained from approved source   |     |
|  |     |     | •   |     | 16. Compliance with shell stock tags, condition, display                                     |     |
|  |     |     | •   |     | 17. Compliance with Gulf Oyster Regulations  |     |
| <b>CONFORMANCE WITH APPROVED PROCEDURES</b>  |     |     |     |     |  |     |
|  |     |     | •   |     | 18. Compliance with variance, specialized process and HACCP plan                             |     |
| <b>CONSUMER ADVISORY</b>                     |     |     |     |     |  |     |
| •  |     |     |     |     | 19. Consumer advisory provided for raw or undercooked foods                                  |     |
|  |     |     | •   |     | 20. Licensed health care facilities/public and private schools: prohibited foods not offered |     |
| <b>WATER/HOT WATER</b>                       |     |     |     |     |  |     |
| •  |     |     |     |     | 21. Hot and cold water available   |     |
| •  |     |     |     |     | 22. Sewage and wastewater properly disposed  |     |
| <b>VERMIN</b>                                |     |     |     |     |  |     |
| •  |     |     |     |     | 23. No rodents, insects, birds, or animals   |     |

|  |            |            |
|--|------------|------------|
| FACILITY NAME  | DATE       | Permit No. |
| Gastronome - Pizza/Deli  | 12/18/2019 | 19-14      |
| FACILITY LOCATION  |            |            |
| 800 N. State College Blvd., Student Housing, Fullerton, CA 92831 |            |            |

**Good Retail Practices**

| OUT                                     | Violation  | COS | OUT  | Violation | COS | OUT                              | Violation  | COS |
|---|--|-----|--|-----------|-----|----------------------------------|--|-----|
| <b>SUPERVISION</b>                      |  |     | <b>EQUIPMENT/UTENSILS/LINENS</b>   |           |     | <b>PHYSICAL FACILITIES</b>       |  |     |
|   | 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             |     |
| <b>GENERAL FOOD SAFETY REQUIREMENTS</b> |  |     | <b>PHYSICAL FACILITIES</b>   |           |     | <b>PERMANENT FOOD FACILITIES</b> |  |     |
|   | 26. Approved thawing methods used, frozen food         |     | 35. Equipment/utensils approved, installed, clean, good repair, capacity |           |     |                                  | 45. Floor, walls, and ceilings: built, maintained, and cleaned     |     |
|   | 27. Food separated and protected                       |     | 36. Equipment, utensils, and linens: storage and use                     |           |     |                                  | 46. No unapproved private homes/living or sleeping quarters        |     |
|   | 28. Washing fruits and vegetables                      |     | 37. Vending Machines   |           |     | <b>SIGNS/REQUIREMENTS</b>        |  |     |
|   | 29. Toxic substances properly identified, stored, used |     | 38. Adequate ventilation and lighting, designated areas, use             |           |     |                                  | 47. Signs posted, last inspection report available, placard posted |     |
| <b>FOOD STORAGE/DISPLAY/SERVICE</b>     |  |     | <b>PHYSICAL FACILITIES</b>   |           |     | <b>COMPLIANCE ENFORCEMENT</b>    |  |     |
|   | 30. Food storage, food storage containers identified   |     | 39. Thermometers provided and accurate                                   |           |     |                                  | 48. Plan review  |     |
|   | 31. Consumer self-service                              |     | 40. Wiping cloths: properly used and stored                              |           |     |                                  | 49. Permits available  |     |
|   | 32. Food properly labeled and honestly presented       |     | <b>PHYSICAL FACILITIES</b>   |           |     |                                  | 50. Impoundment  |     |
|   |  |     | 41. Plumbing: proper backflow devices                                    |           |     |                                  | 51. Permit Suspension  |     |
|   |  |     | 42. Garbage and refuse properly disposed of, facilities maintained       |           |     |                                  |  |     |

**Opening Comments**

**33. Nonfood contact surfaces clean**

All nonfood-contact surfaces of utensils and equipment shall be clean. (114115(c))

Inspector Comments: An accumulation of spilled/leaked liquid was observed in the cabinet below the beverage station. PIC stated Pepsi will work to repair the beverage stations over winter break. Remove accumulation, repair equipment as necessary, and maintain clean.

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](http://www.ehs.fullerton.edu)