

CALIFORNIA STATE UNIVERSITY, FULLERTON

Division of Administration & Finance

Capital Programs & Facilities Management, Environmental Health & Safety
P.O. Box 6806, Fullerton, CA 92834-6806 / T 657-278-7233 / safety@fullerton.edu / ehs.fullerton.edu

RETAIL FOOD FACILITY INSPECTION REPORT

FACILITY NAME		OPERATOR	Permit No.		
Arboretum Visitor Cntr		Fullerton Arboretum	21-03		
FACILITY LOCATION		INSPECTOR			
800 N. State College Blvd., F	ullerton Arboretum, Fullerton, C	CA 92831	Justine Baldacci		
FOOD MANAGER / CERTIFICATE EXPIRATION DATE		PERSON IN CHARGE / TITLE			
Not applicable		Marta McDaniel / Staff			
INSPECTION DATE	INSPECTION TYPE	RE-INSPECTION Date	INSPECTION RESULTS		
06/30/2021	Routine	06/30/2022	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									
			•		Demonstration of knowledge, food safety certification		•					14. Food contact surfaces clean and sanitized	
EMPLOYEE HEALTH AND HYGENIC PRACTICES								•	14A. Sanitizer type is Chlorine				
			•		2. Communicable diseases: reporting, restrictions, and exclusions						•	14B. Sanitizer type is Quaternary Ammonium	
			•		No discharge from eyes, nose, or mouth						•	14C. Sanitizer type is lodine	
			•		4. Proper eating,tasting, drinking or tobacco use	ing,tasting, drinking or tobacco use				•		14D. Sanitizer type is Hot Water	
CONTAMINATION BY HANDS					FOOD FROM APPROVED SOURCES								
			•		5. Hands clean and properly washed, gloves used properly		•					15. Food Obtained from approved source	
•					Adequate hand washing facilities supplied and accessible.					•		16. Compliance with shell stock tags, condition, display	
								•		17. Compliance with Gulf Oyster Regulations			
TIME AND TEMPERATURE RELATIONSHIPS 7A. Proper hot holding temperatures.				CONFORMANCE WITH APPROVED PROCEDURES									
•			_		7B. Proper cold holding temperatures.					•		18. Compliance with variance, specialized process and HACCP plan	
H			•		Times as a public health control; procedures and		CONSUMER ADVISORY						
			•		records 9. Proper cooling methods					•		19. Consumer advisory provided for raw or undercooked foods	
				•	10. Proper Cooking time and temperature					•		20. Licensed health care facilities/public and private schools: prohibited foods not offered	
			•		11. Proper reheating procedures for hot holding		WATER/HOT WATER						
	PROTECTION FROM CONTAMINATION			•					21. Hot and cold water available				
•					12. Return and re-service of food		•					22. Sewage and wastewater properly disposed	
•					13. Food in good condition, safe, and unadulterated			VERMIN					
							•					23. No rodents, insects, birds, or animals	

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Arboretum Visitor Cntr	06/30/2021	21-03						
FACILITY LOCATION								
800 N. State College Blvd., Fullerton Arboretum, Fullerton, CA 92831								

Good Retail Practices

OUT	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	•	35. Equipment/utensils approved, installed,			PERMANENT FOOD FACILITIES			
	26. Approved thawing methods used, frozen food 27. Food separated and protected			clean, good repair, capacity 36. Equipment, utensils, and linens: storage			45. Floor, walls, and ceilings: built, maintained, and cleaned			
				and use 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 FOOD STORAGE/DISPLAY/SERVICE			designated areas, use 39. Thermometers provided and accurate		47. Signs posted, last inspection report available, placard posted				
				59. Thermometers 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 presented			42. Garbage and refuse properly disposed of, facilities maintained			50. Impoundment 51. Permit Suspension			
				or, radining manifest			31.1 emili ouspension			

Opening Comments

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, 114167, 114169, 114175, 114177, 114180, 114182) Inspector Comments: Air curtain at double door not functional on entry door. Repair so that air curtain is activated when door opens.

38. Adequate ventilation and lighting, designated areas, use

Adequate lighting and ventilation shall be provided. Exhaust hoods should be approved and maintained. (114149, 114149.1, 114149.2, 114149.3, 114252, 114252.1)

Inspector Comments: Non-functional light bulb observed in cold hold unit. Repair or replace light bulb.

39. Thermometers provided and accurate

Probe and display thermometers shall be available for use and provided for all equipment required to hold a certain temperature. (114157, 114159)

Inspector Comments: Cold hold unit lacked thermometer. Place thermometer in cold hold unit.

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

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