

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.		
Carl's Jr		CSU Fullerton Auxiliary Services	21-07		
FACILITY LOCATION	INSPECTOR				
800 N. State College Blvd., Ne	Justine Baldacci				
FOOD MANAGER / CERTIFICATE EXPIRATION DATE		PERSON IN CHARGE / TITLE			
Gregorio Vasquez, 3/26/2026		Valarie Ramirez / Manager			
INSPECTION DATE	INSPECTION TYPE	RE-INSPECTION Date	INSPECTION RESULTS		
08/19/2021	Routine	12/19/2021	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

EMPLOYEE KNOWLEDGE I. Demonstration of knowledge, food safety certification EMPLOYEE HEALTH AND HYGENIC PRACTICES I. Demonstration of knowledge, food safety tertification EMPLOYEE HEALTH AND HYGENIC PRACTICES I. Demonstration of knowledge, food safety tertification I. Demonstration of knowledge, food safety tertification of kn						
1. Demonstration of knowledge, food safety certification 1. Demonstration of knowledge, food safety certification 14. Food contact surfaces clean and sanitic 14. Sanitizer type is Chlorine 14. Sanitizer type is Chlorine 14. Sanitizer type is Quaternary Ammonit 14. Sanitizer type is Quaternary	COS					
Certification EMPLOYEE HEALTH AND HYGENIC PRACTICES	PROTECTION FROM CONTAMINATION					
EMPLOYEE HEALTH AND HYGENIC PRACTICES 2. Communicable diseases: reporting, restrictions, and exclusions 3. No discharge from eyes, nose, or mouth 4. Proper eating,tasting, drinking or tobacco use CONTAMINATION BY HANDS 14B. Sanitizer type is Quaternary Ammonit 14C. Sanitizer type is lodine 14D. Sanitizer type is Hot Water FOOD FROM APPROVED SOURCES	zed					
exclusions 3. No discharge from eyes, nose, or mouth 4. Proper eating,tasting, drinking or tobacco use CONTAMINATION BY HANDS 14C. Sanitizer type is lodine 14D. Sanitizer type is Hot Water FOOD FROM APPROVED SOURCES						
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CONTAMINATION BY HANDS CONTAMINATION BY HANDS FOOD FROM APPROVED SOURCES FOOD FROM APPROVED SOURCES						
CONTAMINATION BY HANDS						
15 Food Obtained from approved source						
properly						
6. Adequate hand washing facilities supplied and 6. Adequate hand washing facilities supplied and 6. Adequate hand washing facilities supplied and	tion,					
accessible. • 17. Compliance with Gulf Oyster Regulatio	ns					
TIME AND TEMPERATURE RELATIONSHIPS	· · · · · · · · · · · · · · · · · · ·					
7A. Proper hot holding temperatures. CONFORMANCE WITH APPROVED PROCEDU CONFORMA						
7B. Proper cold holding temperatures. 18. Compliance with variance, specialized and HACCP plan	orocess					
8. Times as a public health control; procedures and records ONSUMER ADVISORY						
9. Proper cooling methods 9. Proper cooling methods 19. Consumer advisory provided for raw or undercooked foods						
10. Proper Cooking time and temperature 10. Proper Cooking time and temperature 20. Licensed health care facilities/public are schools: prohibited foods not offered	d private					
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 dispose	sed					
13. Food in good condition, safe, and unadulterated VERMIN						
23. No rodents, insects, birds, or animals						

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FACILITY NAME	DATE	Permit No.
Carl's Jr	08/19/2021	21-07
FACILITY LOCATION		
800 N State College Blvd Next to GH Fullerton CA 9283	1	

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	TS	•	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			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,		\vdash		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			· ·			COMPLIANCE ENFORCEMENT	
	30. Food storage, food storage containers			40. Wiping cloths: properly used and stored			48. Plan review	
-	identified 31. Consumer self-service 32. Food properly labeled and honestly presented			PHYSICAL FACILITIES		49. Permits available		
			41. Plumbing: proper backflow devices				+	
			-	10. O-sh and a-fra	\vdash		50. Impoundment	
				42. Garbage and refuse properly disposed of, facilities maintained			51. Permit Suspension	

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, 114163, 114165, 114167, 114169, 114175, 114177, 114180, 114182) Inspector Comments: Deteriorating pipe insulation observed in cold hold unit at prep line. Repair or replace pipe insulation.

Pan of water and ice observed in cold hold unit at prep line; staff reported pan is to catch dripping water. Repair unit to eliminate drip.

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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