**County of Santa Clara**
**Department of Environmental Health**
**Consumer Protection Division**
1555 Berger Drive, Suite 300, San Jose, CA 95112-2716
Phone (408) 918-3400 www.ehinfo.org

# OFFICIAL INSPECTION REPORT

| Facility | Site Address | Inspection Date |
|---|---|---|
| FA0206890 - SIGNIA BY HILTON SAN JOSE - ALTURA POOL | 170 S MARKET ST, SAN JOSE, CA 95113 | 09/11/2025 |
| **Program** | **Owner Name** | **Inspection Time** |
| PR0451173 - FOOD PREP / FOOD SVC OP 0-5 EMPLOYEES RC 1 - FP09 | NEX SJ LLC | 15:05 - 15:25 |
| **Inspected By** | **Inspection Type** | **Consent By** / **FSC** |
| ALEXANDER ALFARO | ROUTINE INSPECTION | MICHAEL ROMNEY - CHIEF ENGINEER / Exempt |

**Placard Color & Score**
**GREEN**
**100**

| RISK FACTORS AND INTERVENTIONS | | IN | OUT Major | OUT Minor | COS/SA | N/O | N/A | PBI |
|---|---|---|---|---|---|---|---|---|
| K01 | Demonstration of knowledge; food safety certification | | ■ | | | | X | |
| K02 | Communicable disease; reporting/restriction/exclusion | X | | ■ | | ■ | ■ | |
| K03 | No discharge from eyes, nose, mouth | X | | ■ | | | ■ | |
| K04 | Proper eating, tasting, drinking, tobacco use | X | ■ | | | | ■ | |
| K05 | Hands clean, properly washed; gloves used properly | X | | | | | ■ | |
| K06 | Adequate handwash facilities supplied, accessible | X | | | | ■ | ■ | |
| K07 | Proper hot and cold holding temperatures | | | | | | X | |
| K08 | Time as a public health control; procedures & records | | | | | | X | |
| K09 | Proper cooling methods | | | | | | X | |
| K10 | Proper cooking time & temperatures | | | | | | X | |
| K11 | Proper reheating procedures for hot holding | | | | | | X | |
| K12 | Returned and reservice of food | | ■ | | | | X | |
| K13 | Food in good condition, safe, unadulterated | X | | | | ■ | ■ | |
| K14 | Food contact surfaces clean, sanitized | X | | | | | | S |
| K15 | Food obtained from approved source | X | | ■ | | ■ | ■ | S |
| K16 | Compliance with shell stock tags, condition, display | | | | | | X | |
| K17 | Compliance with Gulf Oyster Regulations | | | ■ | | | X | |
| K18 | Compliance with variance/ROP/HACCP Plan | | | | | ■ | X | |
| K19 | Consumer advisory for raw or undercooked foods | | ■ | | | ■ | X | |
| K20 | Licensed health care facilities/schools: prohibited foods not being offered | | | ■ | | ■ | X | |
| K21 | Hot and cold water available | X | | | | ■ | ■ | S |
| K22 | Sewage and wastewater properly disposed | X | | | | ■ | ■ | |
| K23 | No rodents, insects, birds, or animals | X | | | | ■ | ■ | S |

| GOOD RETAIL PRACTICES | | OUT | COS |
|---|---|---|---|
| K24 | Person in charge present and performing duties | | |
| K25 | Proper personal cleanliness and hair restraints | | |
| K26 | Approved thawing methods used; frozen food | | |
| K27 | Food separated and protected | | |
| K28 | Fruits and vegetables washed | | |
| K29 | Toxic substances properly identified, stored, used | | |
| K30 | Food storage: food storage containers identified | | |
| K31 | Consumer self service does prevent contamination | | |
| K32 | Food properly labeled and honestly presented | | |
| K33 | Nonfood contact surfaces clean | | |
| K34 | Warewash facilities: installed/maintained; test strips | | |
| K35 | Equipment, utensils: Approved, in good repair, adequate capacity | | |
| K36 | Equipment, utensils, linens: Proper storage and use | | |
| K37 | Vending machines | | |
| K38 | Adequate ventilation/lighting; designated areas, use | | |
| K39 | Thermometers provided, accurate | | |
| K40 | Wiping cloths: properly used, stored | | |
| K41 | Plumbing approved, installed, in good repair; proper backflow devices | | |
| K42 | Garbage & refuse properly disposed; facilities maintained | | |
| K43 | Toilet facilities: properly constructed, supplied, cleaned | | |
| K44 | Premises clean, in good repair; Personal/chemical storage; Adequate vermin-proofing | | |
| K45 | Floor, walls, ceilings: built,maintained, clean | | |
| K46 | No unapproved private home/living/sleeping quarters | | |
| K47 | Signs posted; last inspection report available | | |



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| | | | |
|---|---|---|---|
| K48 | Plan review | | |
| K49 | Permits available | | |
| K58 | Placard properly displayed/posted | | |

## Comments and Observations

### Major Violations

No major violations were observed during this inspection.

### Minor Violations

No minor violations were observed during this inspection.

### Performance-Based Inspection Questions

All responses to PBI questions were satisfactory.

### Measured Observations

| Item | Location | Measurement | Comments |
|---|---|---|---|
| Water | Handwash Sink | 120.00 Fahrenheit | |
| Water | Mop Sink | 120.00 Fahrenheit | |
| Ambient Air | Mini Cooler | 34.00 Fahrenheit | |

### Overall Comments:

***Note:***

***- Facility is not in operation yet. Per michael they are waiting on an air balance test.***
***- Once facility is open, submits the air balance test, and has the permit condition lifted the permit category will be upgraded to a FP10 to accommodate the full submitted menu.***

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***OWNERSHIP CHANGE INFORMATION***
***NEW FACILITY NAME: Signia by Hilton San Jose - Altura Pool Bar and Grille***
***NEW OWNER: BRSP Market SJ, LLC***

***The applicant has completed the facility evaluation application process for an Environmental Health Permit.***

***The permit category for this facility is FP09. An invoice for the permit fee in the amount of $652.00 will be mailed to the billing address on the application. Payment must be submitted within 10 days of receipt of the invoice. The owner is responsible for contacting our department if an invoice is not received and remit payment within 30 days.***

***The Environmental Health Permit will be effective: 10/01/25 - 09/30/26. This report serves as a temporary permit. However, the permit will be deemed invalid if the permit fee is not paid in full within 30 days from the date of this report. Okay to Operate.***

***An official permit will be mailed to the address on file and shall be posted in public view upon receipt.***

****Structural Review inspection conducted on 09/11/25***

****Permit condition: THE EXISTING MECHANICAL TYPE 1 HOOD CANNOT BE USED UNTIL AN OFFICIAL AIR BALANCE AND VERIFICATION OF THE AIR BALANCE BY THIS DEPARTMENT HAS BEEN COMPLETED. THE FACILITY MUST BE FULLY ENCLOSED AT ALL TIMES DURING OPERATION HOURS THAT INVOLVE FOOD PREPARATION. NO OPEN POTENTIALLY HAZARDOUS FOODS ARE ALLOWED UNTIL THE FOLDING DOORS ARE SECURED AND ALL WINDOWS HAVE A 16 MESH PER SQUARE INCH SCREEN INSTALLED.***

****Obtain food safety manager certificate within 60 days. All other food employees must have valid food handler cards within 30***

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***days from hire date.***

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When required to determine compliance, a single reinspection will be conducted without additional charge. If subsequent reinspections are required, an hourly fee (minimum one hour) at the current rate approved by the Board of Supervisors will be assessed for each and every reinspection until the necessary changes or corrections are made. Unless otherwise noted by the inspector, all violations are to be corrected no later than **9/25/2025**.Any major change in menu or any change in ownership must have prior approval by this Department. This may require structural and/or equipment changes or remodeling to accommodate new operations.

**Legend:**

| | |
|---|---|
| **[CA]** | Corrective Action |
| **[COS]** | Corrected on Site |
| **[N]** | Needs Improvement |
| **[NA]** | Not Applicable |
| **[NO]** | Not Observed |
| **[PBI]** | Performance-based Inspection |
| **[PHF]** | Potentially Hazardous Food |
| **[PIC]** | Person in Charge |
| **[PPM]** | Part per Million |
| **[S]** | Satisfactory |
| **[SA]** | Suitable Alternative |
| **[TPHC]** | Time as a Public Health Control |

**Received By:** Michael Romney
Chief Engineer

**Signed On:** September 11, 2025