

# 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

|                                                                                  |  |                                                                     |                                           |                                      |                                         |                                                                                                                                                                |  |                                        |
|----------------------------------------------------------------------------------|--|---------------------------------------------------------------------|-------------------------------------------|--------------------------------------|-----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------|
| <b>Facility</b><br>FA0203520 - CENTURY CINEMA                                    |  | <b>Site Address</b><br>1500 N SHORELINE BL, MOUNTAIN VIEW, CA 94041 |                                           | <b>Inspection Date</b><br>07/09/2026 |                                         | <b>Placard Color &amp; Score</b><br><div style="background-color: green; color: white; padding: 10px; text-align: center;"> <b>GREEN</b><br/> <b>89</b> </div> |  |                                        |
| <b>Program</b><br>PR0303202 - FOOD PREP / FOOD SVC OP 6-25 EMPLOYEES RC 2 - FP13 |  |                                                                     | <b>Owner Name</b><br>CENTURY THEATRES INC |                                      | <b>Inspection Time</b><br>14:25 - 16:00 |                                                                                                                                                                |  |                                        |
| <b>Inspected By</b><br>TRAVIS KETCHU                                             |  | <b>Inspection Type</b><br>ROUTINE INSPECTION                        |                                           | <b>Consent By</b><br>KYLE CORNELIUS  |                                         |                                                                                                                                                                |  | <b>FSC</b> Kyle Cornelius<br>1/30/2028 |

  

| RISK FACTORS AND INTERVENTIONS |                                                                             | IN | OUT   |       | COS/SA | N/O | N/A | PBI |
|--------------------------------|-----------------------------------------------------------------------------|----|-------|-------|--------|-----|-----|-----|
|                                |                                                                             |    | Major | Minor |        |     |     |     |
| K01                            | Demonstration of knowledge; food safety certification                       | X  |       |       |        |     |     |     |
| K02                            | Communicable disease; reporting/restriction/exclusion                       | X  |       |       |        |     |     | S   |
| 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  |       |       |        |     |     | S   |
| 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     |       | X      |     |     | S   |
| K15                            | Food obtained from approved source                                          | X  |       |       |        |     |     |     |
| 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     |        |     |     |     |
| K22                            | Sewage and wastewater properly disposed                                     | X  |       |       |        |     |     |     |
| K23                            | No rodents, insects, birds, or animals                                      | X  |       |       |        |     |     |     |

  

| 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                                      |     |     |

# OFFICIAL INSPECTION REPORT

|                                                                           |                                   |                                                              |                                  |
|---------------------------------------------------------------------------|-----------------------------------|--------------------------------------------------------------|----------------------------------|
| Facility<br>FA0203520 - CENTURY CINEMA                                    |                                   | Site Address<br>1500 N SHORELINE BL, MOUNTAIN VIEW, CA 94043 | Inspection Date<br>07/09/2026    |
| Program<br>PR0303202 - FOOD PREP / FOOD SVC OP 6-25 EMPLOYEES RC 2 - FP13 |                                   | Owner Name<br>CENTURY THEATRES INC                           | Inspection Time<br>14:25 - 16:00 |
| K48                                                                       | Plan review                       |                                                              |                                  |
| K49                                                                       | Permits available                 |                                                              |                                  |
| K58                                                                       | Placard properly displayed/posted |                                                              |                                  |

## Comments and Observations

### Major Violations

K14 - 8 Points - Food contact surfaces unclean and unsanitized; 113984(e), 114097, 114099.1, 114099.4, 114099.6, 114101, 114105, 114109, 114111, 114113, 114115(a,b,d), 114117, 14125(b), 114141

**Inspector Observations: Soiled pizza slicers on the preparation table at the cook line. Employee stated that the slicers have been used to cut pizza since 10 am.**

**[CA] Pizza slicers shall be washed, rinsed and sanitized every 4 hours or less after initial use.**

**[COS] Pizza slicers washed, rinsed and sanitized.**

### Minor Violations

K21 - 3 Points - Hot and cold water not available; 113953(c), 114099.2(b), 114163(a), 114189, 114192, 114192.1, 11419

**Inspector Observations: The hand wash sink at the front serving line lacked a supply of hot water.**

**[CA] An approved, adequate, protected, pressurized, potable supply of hot water and cold water shall be provided.**

**[COS] Hot and cold water supply restored.**

**Measured the water temperature from multiple restroom hand wash sinks at less than 100 F or greater than 108 F.**

**[CA] Handwashing facilities equipped with a mixing valve that is not readily adjustable at the faucet, shall provide warm water at least 100°F, but not greater than 108°F.**

### Performance-Based Inspection Questions

All responses to PBI questions were satisfactory.

### Measured Observations

| Item            | Location        | Measurement       | Comments |
|-----------------|-----------------|-------------------|----------|
| hot dog         | warmer          | 142.00 Fahrenheit |          |
| milk shake base | walk in freezer | 15.00 Fahrenheit  |          |
| ice cream       | freezer         | 10.00 Fahrenheit  |          |
| dipndots        | freezer         | -5.00 Fahrenheit  |          |
| quat sanitizer  | 3 comp sink     | 200.00 PPM        |          |
| hot dog         | upright fridge  | 37.00 Fahrenheit  |          |
| red sauce       | prep fridge     | 39.00 Fahrenheit  |          |
| pizza dough     | upright fridge  | 37.00 Fahrenheit  |          |
| milk            | walk in fridge  | 40.00 Fahrenheit  |          |

### Overall Comments:

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 **7/23/2026**. 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.

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## 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: Kyle Cornelius  
Manager

Signed On: July 09, 2026