

# 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>FA0307878 - JAMBA JUICE - STORAGE UNIT       |  | <b>Site Address</b><br>925 BLOSSOM HILL RD SFC5, SAN JOSE, CA 95127 |                                              | <b>Inspection Date</b><br>12/03/2025 |                                         | <b>Placard Color &amp; Score</b><br><div style="font-size: 2em; font-weight: bold; color: red;">RED</div> <div style="font-size: 3em; font-weight: bold; color: black;">90</div> |  |                   |
| <b>Program</b><br>PR0451474 - LIMITED FOOD SERVICE CAT 2 - FP76 |  |                                                                     | <b>Owner Name</b><br>FRESH DINING CONCEPTS L |                                      | <b>Inspection Time</b><br>12:00 - 12:30 |                                                                                                                                                                                  |  |                   |
| <b>Inspected By</b><br>JENNIFER RIOS                            |  | <b>Inspection Type</b><br>ROUTINE INSPECTION                        |                                              | <b>Consent By</b><br>MARIA           |                                         |                                                                                                                                                                                  |  | <b>FSC Exempt</b> |

  

| 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  |       |       |        |     |     |     |
| 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   |     |
| 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                                    |     | X   |
| K46                   | No unapproved private home/living/sleeping quarters                                 |     |     |
| K47                   | Signs posted; last inspection report available                                      |     |     |

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|                                                          |                                                              |                                  |
|----------------------------------------------------------|--------------------------------------------------------------|----------------------------------|
| Facility<br>FA0307878 - JAMBA JUICE - STORAGE UNIT       | Site Address<br>925 BLOSSOM HILL RD SFC5, SAN JOSE, CA 95123 | Inspection Date<br>12/03/2025    |
| Program<br>PR0451474 - LIMITED FOOD SERVICE CAT 2 - FP76 | Owner Name<br>FRESH DINING CONCEPTS LLC                      | Inspection Time<br>12:00 - 12:30 |
| K48                                                      | Plan review                                                  |                                  |
| K49                                                      | Permits available                                            |                                  |
| K58                                                      | Placard properly displayed/posted                            |                                  |

## Comments and Observations

### Major Violations

K23 - 8 Points - Observed rodents, insects, birds, or animals; 114259.1, 114259.4, 114259.5

**Inspector Observations:** 1. **Observed Vermin:** Documented in the following areas: Observed rodent droppings on towels used to clean counters (per PIC), observed rodent droppings on the floor by the walk in fridge, and on a sign/tray on shelf. Observed leftovers of chewed on boxes. Per PIC, the affected box had already been removed and contained nutella.

2. **Photographs:** Taken for documentation purposes.

3. **Supervisor Notified:** S. Lew

4. **Notification:** The person in charge during inspection, Maria, has been informed that the facility must close immediately.

**[CA]:** The premises of each food facility must be maintained free of vermin. A facility cannot operate if there is a vermin infestation that leads to contamination of food contact surfaces, packaging, utensils, food equipment, or adulteration of food. The facility is required to cease operations immediately and must remain closed until all corrective actions on the provided checklist are completed.

#### Requirements Before Reopening:

1. Email the signed and completed Reopening Checklist to the assigned inspector.

2. Submit a copy of the pest control report from a licensed provider.

### Minor Violations

K45 - 2 Points - Floor, walls, ceilings: not built, not maintained, not clean; 114143(d), 114266, 114268, 114268.1, 114271, 114272

**Inspector Observations:** Observed many missing ceiling panels above walk in freezer. **[CA]** Repair holes in structure and maintain in good repair to prevent pest harborage.

### Performance-Based Inspection Questions

N/A

### Measured Observations

| Item      | Location       | Measurement     | Comments |
|-----------|----------------|-----------------|----------|
| Ice cream | Walk in fridge | 5.00 Fahrenheit |          |

### Overall Comments:

## CLOSURE / PERMIT SUSPENSION NOTICE

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 **12/17/2025**. 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.

This notice is to inform you that as of this date the Environmental Health Permit for the above mentioned food facility is hereby suspended and all operations therewith are ordered to cease. This action is taken in accordance with Section 114409 of the California Health and Safety Code which states 'If any imminent health hazard is found, unless the hazard is immediately corrected, an enforcement officer may temporarily suspend the permit and order the food facility or cottage food operation immediately closed.'

You have the right to make a written request for a hearing within 15 days after receipt of this notice to show just cause why the permit suspension is not warranted. Failure to request such a hearing within the 15-day period shall be deemed a waiver of the right to a hearing. After these violations have been corrected, you must call the Department of Environmental Health for a reinspection to reinstate the permit to operate. Phone #: (408)918-3400.

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| <b>Program</b><br>PR0451474 - LIMITED FOOD SERVICE CAT 2 - FP76 | <b>Owner Name</b><br>FRESH DINING CONCEPTS LLC                      | <b>Inspection Time</b><br>12:00 - 12:30 |

## Legend:

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



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**Received By:** Maria Estban  
Manager

**Signed On:** December 03, 2025