# 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 |
|---|---|---|
| FA0272548 - APPLE-RW03-ESPRESSO BAR | 3 RESULTS WY 3, CUPERTINO, CA 95014 | 04/29/2025 |

| Program | Owner Name | Inspection Time |
|---|---|---|
| PR0412260 - FOOD PREP / FOOD SVC OP 0-5 EMPLOYEES RC 1 - FP09 | APPLE INC | 10:15 - 11:00 |

| Inspected By | Inspection Type | Consent By | FSC |
|---|---|---|---|
| FRANK LEONG | ROUTINE INSPECTION | TIFFANY BROWN | REBECA HERNANDEZ 08/27/2025 |

**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 | | | | | | 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 | | | | | | S |
| K06 | Adequate handwash facilities supplied, accessible | X | | | | | | S |
| 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 | | | | | | |
| 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 | Site Address | Inspection Date |
|---|---|---|
| FA0272548 - APPLE-RW03-ESPRESSO BAR | 3 RESULTS WY 3, CUPERTINO, CA 95014 | 04/29/2025 |
| **Program** | **Owner Name** | **Inspection Time** |
| PR0412260 - FOOD PREP / FOOD SVC OP 0-5 EMPLOYEES RC 1 - FP09 | APPLE INC | 10:15 - 11:00 |

| | | | |
|---|---|---|---|
| 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 |
|---|---|---|---|
| lactic acid sanitizer | sanitizer bucket (espresso machine) | 2,258.00 PPM | |
| hot water | handwash sink | 100.00 Fahrenheit | |
| chlorine sanitizer | warewash machine | 100.00 PPM | |
| california roll | display refrigerator | 39.00 Fahrenheit | |
| chicken salad | display refrigerator | 40.00 Fahrenheit | |
| half and half | 2 door undercounter refrigerator | 39.00 Fahrenheit | |
| hot water | 3 compartment sink | 120.00 Fahrenheit | |
| lactic acid sanitizer | sanitizer bucket | 2,258.00 PPM | |
| almond milk | 2 door undercounter refrigerator | 34.00 Fahrenheit | |
| milk | 2 door undercounter refrigerator | 33.00 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 **5/13/2025**.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:** TIFFANY BROWN
EHS MANAGER

**Signed On:** April 29, 2025