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
FA0203472 - TEASPOON	134 CASTRO ST, MOUNTAIN VIEW, CA 94041	12/05/2025

Program	Owner Name	Inspection Time
PR0450654 - FOOD PREP / FOOD SVC OP 0-5 EMPLOYEES RC 1 - FP09	3 KINGDOMS, LLC	14:00 - 15:00

Inspected By	Inspection Type	Consent By	FSC
DAVID LEE	ROUTINE INSPECTION	ZHIWEI	

Placard Color & Score

GREEN

97

	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				
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		

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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

K06 - 3 Points - Inadequate handwash facilities: supplied or accessible; 113953, 113953.1, 113953.2, 114067(f)

Inspector Observations: missing wall mounted soap dispenser and empty paper towel dispenser to handsink

Performance-Based Inspection Questions

All responses to PBI questions were satisfactory.

Measured Observations

Item	Location	Measurement	Comments
half & half	2 door reach in cooler	40.00 Fahrenheit	
whipped cream	2 door prep cooler	39.00 Fahrenheit	

Overall Comments:

OWNERSHIP CHANGE INFORMATION
NEW FACILITY NAME: four season tea house
NEW OWNER: ocean season inc

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 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: 1/1/26 - 12/31/26 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 12/5/25***

****Permit condition: none***

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

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 **12/19/2025**.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.

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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: zhiwei

Signed On: December 05, 2025