

# 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>FA0272641 - WALMART # 3023- GROCERY           |  | <b>Site Address</b><br>4055 EVERGREEN VILLAGE SQ 140, SAN JOSE, CA |                                  | <b>Inspection Date</b><br>07/30/2026  |                                         | <b>Placard Color &amp; Score</b><br><div style="background-color: green; color: white; padding: 10px; text-align: center;"> <b>GREEN</b><br/> <b>90</b> </div> |  |                                           |  |
| <b>Program</b><br>PR0412379 - NO FOOD PREP > 20,000 SQ FT - FP08 |  |                                                                    | <b>Owner Name</b><br>WALMART INC |                                       | <b>Inspection Time</b><br>13:25 - 14:25 |                                                                                                                                                                |  |                                           |  |
| <b>Inspected By</b><br>MAMAYE KEBEDE                             |  | <b>Inspection Type</b><br>ROUTINE INSPECTION                       |                                  | <b>Consent By</b><br>CANDELARIA RIVAS |                                         |                                                                                                                                                                |  | <b>FSC</b> Candelaria Rivas<br>09/05/2027 |  |
|                                                                  |  |                                                                    |                                  |                                       |                                         |                                                                                                                                                                |  |                                           |  |

  

| 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  |       |       |        |     |     | S   |
| 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   | S   |
| 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                                    | X   |     |
| 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               | X   |     |
| 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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|                                                           |                                                                   |                                  |
|-----------------------------------------------------------|-------------------------------------------------------------------|----------------------------------|
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| Program<br>PR0412379 - NO FOOD PREP > 20,000 SQ FT - FP08 | Owner Name<br>WALMART INC                                         | Inspection Time<br>13:25 - 14:25 |
| 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

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

**Inspector Observations: The maximum water temperature on the manual three compartment wash sink was measured at 110 oF.**

**[CA] Adjust the water heater temperature to raise the water temperature on the manual three compartments sink to 120 oF.**

K23 - 3 Points - Observed rodents, insects, birds, or animals; 114259.1, 114259.4, 114259.5

**Inspector Observations: Multiple drain flies were observed on the walls of the two janitorial sinks located back by the office and by the bakery area.**

**[CA] Eliminate all insects and rodents from the facility by a legal method.**

K30 - 2 Points - Food storage containers are not identified; 114047, 114049, 114051, 114053, 114055, 114067(h), 114069 (b)

**Inspector Observations: Many food products on boxes were stored directly on the floor or on milk crate back in the storage area.**

**[CA] To prevent insect hiding and breeding and for easy cleaning of the floor area, please store all food products at least six inches off the floor on an approved shelf or dunnage rack.**

K41 - 2 Points - Plumbing unapproved, not installed, not in good repair; improper backflow devices; 114171, 114189.1, 114190, 114192, 114193, 114193.1, 114199, 114201, 114269

**Inspector Observations: The faucet for the produce wash station is missing.**

**[CA] Replace the missing faucet immediately.**

### Performance-Based Inspection Questions

All responses to PBI questions were satisfactory.

### Measured Observations

| Item       | Location                       | Measurement       | Comments |
|------------|--------------------------------|-------------------|----------|
| Hot water  | Produce three compartment sink | 110.00 Fahrenheit |          |
| Shell eggs | Display case                   | 35.00 Fahrenheit  |          |
| Beef       | Display case                   | 34.00 Fahrenheit  |          |
| Chicken    | Display case                   | 38.00 Fahrenheit  |          |
| Milk       | Reach-in cooler                | 38.00 Fahrenheit  |          |
| Hot water  | Janitorial sink                | 130.00 Fahrenheit |          |

### Overall Comments:

**Note: 1. Food safety manager certificate: Candelaria Rivas - 09/05/2027.**

**2. This was a joint inspection Shannon Robinson**

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 **8/13/2026**. 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 |



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**Received By:** Candelaria Rivas  
Operations Manager

**Signed On:** July 30, 2026