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 FA0300573 - DUNKIN DONUT | -S | Site Address 1110 FOXWORTH | IY AV, SAN JOSE, | CA 95118 | | Inspecti 09/01 | on Date /2021 | | | Color & Sco | ore |
|---|--|-------------------------------|-------------------------|----------|--------|-------------------|-----------------------|--------|-----|-------------|-----|
| Program Owr | | | Owner Name RAYMOND F | REALE | | | ion Time) - 16:05 | | | ED | |
| Inspected By RAYMOND CHUNG | Inspection Type ROUTINE INSPECTION | Consent By DEVIN LIN | FS | с | | | | | 7 | 77 | |
| RISK FACTORS AND I | | | | | IN | Ol | UT Minor | COS/SA | N/O | N/A | PBI |
| | edge; food safety certification | | | | Х | Wajoi | WIIIO | | | | |
| | ; reporting/restriction/exclusion | | | | X | | | | | | S |
| K03 No discharge from eyes | | | | | X | | | | | | 0 |
| K04 Proper eating, tasting, d | | | | | ^ X | | | | | | |
| 1 0. 0. | vashed; gloves used properly | | | | ^ X | | | | | | |
| κο6 Adequate handwash fac | | | | | ^ | | Х | | | | N |
| K07 Proper hot and cold hold | | | | | х | | ^ | | | | IN |
| | control; procedures & records | | | | ^ | | | | | X | |
| K09 Proper cooling methods | • | | | | | | | | | X | |
| K10 Proper cooking time & to | | | | | | | | | | X | |
| K11 Proper reheating proces | | | | | | | | | Х | | |
| K11 Proper reneating proceed K12 Returned and reservice | | | | | | | | | X | | |
| K12 Returned and reservice K13 Food in good condition, | | | | | Х | | | | ^ | | |
| K13 Food in good condition, K14 Food contact surfaces of | | | | | ^ | Х | | | | | N |
| K14 Food contact surfaces C | | | | | Х | ^ | | | | | IN |
| | | | | | ^ | | | | | Х | |
| K16 Compliance with shell s K17 Compliance with Gulf O | | | | | | | | | | X | |
| | | | | | | | | | | X | |
| K18 Compliance with variant | | | | | | | | | | X | |
| K19 Consumer advisory for I | | t being offered | | | | | | | | X | |
| K21 Hot and cold water avai | cilities/schools: prohibited foods no | ot being ollered | | | | Х | | | | ^ | |
| | | | | | Х | ^ | | | | | |
| κ22 Sewage and wastewateκ23 No rodents, insects, bird | | | | | ^ X | | | | | | |
| | | | | | ^ | | | | | | 000 |
| GOOD RETAIL PRACT | | | | | | | | | | OUT | COS |
| K25 Proper personal cleanlin | | | | | | | | | | | |
| K26 Approved thawing meth | | | | | | | | | | | |
| K27 Food separated and pro | | | | | | | | | | | |
| K28 Fruits and vegetables w | | | | | | | | | | | |
| K29 Toxic substances proper | | | | | | | | | | | |
| K30 Food storage: food stora | | | | | | | | | | Х | |
| | | | | | | | | | | ~~~ | |
| K31 Consumer self service does prevent contamination K32 Food properly labeled and honestly presented | | | | | | | | | | | |
| K33 Nonfood contact surface | | | | | | | | | | | |
| | K34 Warewash facilities: installed/maintained; test strips | | | | | | | | | | |
| K35 Equipment, utensils: Approved, in good repair, adequate capacity | | | | | | | | | | | |
| Kis Equipment, utensils, linens: Proper storage and use | | | | | | | | | | | |
| K37 Vending machines | | | | | | | | | | | |
| Kisi Vending indentified Kisi 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 | | | | | | | Х | | | | |
| K46 No unapproved private home/living/sleeping quarters | | | | | | | | | | | |
| K47 Signs posted; last inspection report available | | | | | | | | | | | |
| The posted, rast inspection report available | | | | | | | | | | | |

OFFICIAL INSPECTION REPORT

| Facility | Site Address | | Inspection Date |
|---|--------------------------------|------------------------------------|-------------------------------|
| FA0300573 - DUNKIN DONUTS Program | 1110 FOXWORTHY AV, S | AN JOSE, CA 95118 ner Name | 09/01/2021 Inspection Time |
| PR0441196 - FOOD PREP / FOOD SVC OP 6-25 EMPLOYEES RO | | AYMOND REALE | 14:20 - 16:05 |
| K48 Plan review | | | |
| K49 Permits available K58 Placard properly displayed/posted | | | |
| riacard property displayed/posted | | | |
| Co | omments and Observ | vations | |
| Major Violations | | | |
| K14 - 8 Points - Food contact surfaces unclean and unsanitized; 113 114109, 114111, 114113, 114115(a,b,d), 114117, 14125(b), 114141 | 3984(e), 114097, 114099.1, 1 | 14099.4, 114099.6, 114101, 114105, | |
| Inspector Observations: | | | Follow-up By |
| Quat sanitizer from the dispenser at the 3-compartment s hooked up to a bottle of detergent. [corrective action] Re sanitizer. Sanitizer shall be dispensed at 200 ppm. | | - | 09/02/2021 |
| K21 - 8 Points - Hot and cold water not available; 113953(c), 114099 | 9.2(b), 114163(a), 114189, 114 | 192, 114192.1, 11419 | |
| Inspector Observations: | | | Follow-up By |
| No hot water was available at this facility. Water from the | e 3-compartment sink and | l kitchen hand sink measured at | 09/02/2021 |
| 73F. [corrective action] Provide hot water at all sinks - 3- | compartment sink and m | op sink at 120F or above; hand | |
| sinks at 100F or above | | | |
| Minor Violations | | | |
| K06 - 3 Points - Inadequate handwash facilities: supplied or accessil | ble; 113953, 113953.1, 11395 | 3.2, 114067(f) | |
| Inspector Observations: | | | |
| The paper towel dispenser at the hand sink located next t Repair the paper towel dispenser. | to the cookline was not o | perable. [corrective action] | |
| K30 - 2 Points - Food storage containers are not identified; 114047, | 114049, 114051, 114053, 114 | 055, 114067(h), 114069 (b) | |
| Inspector Observations: | | | |
| Observed boxes of food stored directly on the floor in the dunnage racks in the walk-in freezer so that all boxes can | _ | | |
| K45 - 2 Points - Floor, walls, ceilings: not built, not maintained, not c | lean; 114143(d), 114266, 114 | 268, 114268.1, 114271, 114272 | |
| Inspector Observations: | | | |
| 1. Observed debris and grime on the floor under the cook service area. [corrective action] Thoroughly clean the flo | • • | | |

2. Observed coffee stains on the wall next to the ice machine. [corrective action] Thoroughly clean the wall and maintain routinely.

Performance-Based Inspection Questions

Needs Improvement - Adequate handwash facilities: supplied or accessible. Needs Improvement - Food contact surfaces clean, sanitized.

Measured Observations

| ltem | Location | Measurement | Comments |
|----------------|---------------------|------------------|----------|
| quat sanitizer | from the dispenser | 0.00 PPM | |
| cream | creamer dispenser | 40.00 Fahrenheit | |
| hashbrown | cold drawer | 23.00 Fahrenheit | |
| water | hand sink | 73.00 Fahrenheit | |
| egg patty | prep unit | 37.00 Fahrenheit | |
| sausage patty | cold drawer | 35.00 Fahrenheit | |
| sausage patty | prep unit | 39.00 Fahrenheit | |
| oatmilk | undercounter cooler | 39.00 Fahrenheit | |
| eggs | walk-in cooler | 36.00 Fahrenheit | |
| water | 3-compartment sink | 73.00 Fahrenheit | |
| milk | walk-in cooler | 36.00 Fahrenheit | |

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|--|-----------------------------------|---------------|-----------------|--|
| FA0300573 - DUNKIN DONUTS | 1110 FOXWORTHY AV, SAN JOSE, C | | 09/01/2021 | |
| Program PR0441196 - FOOD PREP / FOOD SVC OP 6-25 EMPLOYEES RC | Owner Name 2 - FP13 RAYMOND RE | ALE 14:20 - 1 | - | |

Overall Comments:

[TPHC]

Time as a Public Health Control

FACILITY CLOSED

This facility is closed due to no hot water. This facility shall remain cosed and cease all food operations until hot water is provided and a follow-up inspection is made by this department. Call Raymond Chung at (408) 461-0782 for a follow-up inspection.

Food Safety Certificate was not available at this time. Provide certificate at time of follow-up inspection.

Juan Mendoza (860) 549-7978

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 <u>9/15/2021</u>. 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.

| Legen | <u>d:</u> | | |
|-------|------------------------------|-------------------------------|--|
| [CA] | Corrective Action | | |
| [COS] | Corrected on Site | | |
| [N] | Needs Improvement | · · | |
| [NA] | Not Applicable | | |
| [NO] | Not Observed | Received By: Juan Mendoza | |
| [PBI] | Performance-based Inspection | Manager | |
| [PHF] | Potentially Hazardous Food | Signed On: September 01, 2021 | |
| [PIC] | Person in Charge | | |
| [PPM] | Part per Million | | |
| [S] | Satisfactory | | |
| [SA] | Suitable Alternative | | |