

# 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>FA0263757 - MADATE CONCESSIONS COMMISSARY                    |  | <b>Site Address</b><br>1 AMPHITHEATRE PY, MOUNTAIN VIEW, CA 94043 |                                             | <b>Inspection Date</b><br>08/09/2025 |                                         | <b>Placard Color &amp; Score</b><br><div style="font-size: 2em; font-weight: bold; text-align: center;">GREEN</div> <div style="font-size: 3em; font-weight: bold; text-align: center;">96</div> |  |            |
| <b>Program</b><br>PR0388653 - FOOD PREP / FOOD SVC OP 0-5 EMPLOYEES RC 1 - FP09 |  |                                                                   | <b>Owner Name</b><br>MADATE CONCESSIONS LLC |                                      | <b>Inspection Time</b><br>16:45 - 17:30 |                                                                                                                                                                                                  |  |            |
| <b>Inspected By</b><br>TRAVIS KETCHU                                            |  | <b>Inspection Type</b><br>ROUTINE INSPECTION                      |                                             | <b>Consent By</b><br>RYAN            |                                         |                                                                                                                                                                                                  |  | <b>FSC</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  |       |       |        |     |     | 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   |     |
| 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                                                        | X   |     |
| 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<br>FA0263757 - MADATE CONCESSIONS COMMISSARY                    | Site Address<br>1 AMPHITHEATRE PY, MOUNTAIN VIEW, CA 94043 | Inspection Date<br>08/09/2025    |
| Program<br>PR0388653 - FOOD PREP / FOOD SVC OP 0-5 EMPLOYEES RC 1 - FP09 | Owner Name<br>MADATE CONCESSIONS LLC                       | Inspection Time<br>16:45 - 17:30 |
| K48 Plan review                                                          |                                                            |                                  |
| K49 Permits available                                                    | X                                                          |                                  |
| K58 Placard properly displayed/posted                                    |                                                            |                                  |

## Comments and Observations

### Major Violations

No major violations were observed during this inspection.

### Minor Violations

K27 - 2 Points - Food not separated and unprotected; 113984(a-d,f), 113986, 114060, 114067(a,d,e,j), 114069(a,b), 114077, 114089.1(c), 114143(c)

**Inspector Observations: Open ice and shaker preparation outside the rear door of the commissary room.**

**[CA] Food preparation shall only occur in approved areas. All open food shall be stored inside of the facility.**

K49 - 2 Points - Permits not available; 114067(b,c), 114381(a), 114387

**Inspector Observations: --48 HOUR NOTICE--**

**Our records indicate this facility is operating without a valid permit and has a delinquent account. Your balance due is \$616.56.**

**Payment must be made immediately to DEH at the address at the top of this report or via our website at [www.Ehinfo.org](http://www.Ehinfo.org).**

Follow-up By  
08/11/2025

**A facility that submits payment of the outstanding balance within 48 hours (2 business days) of this notice will be issued and mailed an operating permit by this department. Failure to comply within 48 hours will result in facility closure and additional enforcement, including but not limited to reinspection(s) and additional cost recovery fees.**

**A facility found to be in continued operation without a permit may incur a penalty of three (3) times the operating permit fee, and fee(s) for re-inspection(s) charged at the current hourly rate approved by the Santa Clara County Board of Supervisors. Penalties and fees incurred due to enforcement activities must be paid in full prior to the issuance of an operating permit.**

### Performance-Based Inspection Questions

All responses to PBI questions were satisfactory.

### Measured Observations

| Item       | Location       | Measurement       | Comments |
|------------|----------------|-------------------|----------|
| warm water | hand wash sink | 100.00 Fahrenheit |          |
| corn dog   | warmer         | 154.00 Fahrenheit |          |
| hot water  | 3 comp sink    | 120.00 Fahrenheit |          |

### Overall Comments:

**Two lawn bars and one concession stand at the sky bar are un-permitted.**

**Cease the sale of open foods in these areas. Menu limited to prepackged non-PHF.**

**Facility shall apply for three new satellite permits prior to resuming open food sales at the sky bar area concession and both lawn bar areas.**

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 **8/23/2025**. 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.

# OFFICIAL INSPECTION REPORT

|                                                                          |                                                            |                                  |
|--------------------------------------------------------------------------|------------------------------------------------------------|----------------------------------|
| Facility<br>FA0263757 - MADATE CONCESSIONS COMMISSARY                    | Site Address<br>1 AMPHITHEATRE PY, MOUNTAIN VIEW, CA 94043 | Inspection Date<br>08/09/2025    |
| Program<br>PR0388653 - FOOD PREP / FOOD SVC OP 0-5 EMPLOYEES RC 1 - FP09 | Owner Name<br>MADATE CONCESSIONS LLC                       | Inspection Time<br>16:45 - 17:30 |

## 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:** ryan maderios  
pic  
**Signed On:** August 09, 2025