# **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

K47 Signs posted; last inspection report available



# **OFFICIAL INSPECTION REPORT**

|      | OFFIC  | IAL INSPEC                      | TION R                                    | EPORT |    |                               |             |                    |                              |      |     |
|------|--|---------------------------------|---|-------|----|-------------------------------|-------------|--------------------|------------------------------|------|-----|
| _    | 0209797 - WINGSTOP   | Site Address<br>5134 STEVENS CR | 5134 STEVENS CREEK BL, SAN JOSE, CA 95129 |       |    | Inspection Date<br>10/24/2023 |             |                    | Placard Color & Score  GREEN |      |     |
|      | Program         Owner Name           PR0306936 - FOOD PREP / FOOD SVC OP 0-5 EMPLOYEES RC 2 - FP10         LEMON WING CORF                     |                                 |   |       |    | 15:15 - 16:15                 |             |                    |                              | KEEN |     |
| Insp | Inspected By Inspection Type Consent By FSC Not Available  |                                 |   |       |    |                               |             | 94                 |                              |      |     |
| DE   | NNIS LY ROUTINE INSPECTION   | MARIA PATINO                    |   |       |    |                               |             | ╝╚                 |                              |      |     |
| R    | ISK FACTORS AND INTERVENTIONS  |                                 |   |       | IN | Ol<br>Major                   | JT<br>Minor | COS/SA             | N/O                          | N/A  | PBI |
| K01  | Demonstration of knowledge; food safety certification  |                                 |   |       |    |                               | Χ           |                    |                              |      |     |
| K02  | Communicable disease; reporting/restriction/exclusion  |                                 |   |       | X  |                               |             |                    |                              |      |     |
| K03  | No discharge from eyes, nose, mouth  |                                 |   |       | Х  |                               |             |                    |                              |      |     |
| K04  | Proper eating, tasting, drinking, tobacco use  |                                 |   |       | Х  |                               |             |                    |                              |      |     |
| K05  | Hands clean, properly washed; gloves used properly   |                                 |   |       |    |                               |             |                    |                              |      | S   |
| K06  | Adequate handwash facilities supplied, accessible  |                                 |   |       | Χ  |                               |             |                    |                              |      | S   |
|      | Proper hot and cold holding temperatures   |                                 |   |       | Х  |                               |             |                    |                              |      |     |
|      | Time as a public health control; procedures & records  |                                 |   |       | Х  |                               |             |                    |                              |      |     |
|      | Proper cooling methods   |                                 |   |       |    |                               |             |                    |                              | Х    |     |
|      | Proper cooking time & temperatures   |                                 |   |       | X  |                               |             |                    |                              |      | S   |
|      | Proper reheating procedures for hot holding  |                                 |   |       |    |                               |             |                    | Х                            |      |     |
|      | Returned and reservice of food   |                                 |   |       | Х  |                               |             |                    |                              |      |     |
|      | Food in good condition, safe, unadulterated  |                                 |   |       | Х  |                               |             |                    |                              |      |     |
|      | Food contact surfaces clean, sanitized   |                                 |   |       | X  |                               |             |                    |                              |      | S   |
|      | Food obtained from approved source   |                                 |   |       | Х  |                               |             |                    |                              |      |     |
| K16  | Compliance with shell stock tags, condition, display   |                                 |   |       |    |                               |             |                    |                              | X    |     |
|      | Compliance with Gulf Oyster Regulations  |                                 |   |       |    |                               |             |                    |                              | X    |     |
|      | Compliance with variance/ROP/HACCP Plan  |                                 |   |       |    |                               |             |                    |                              | X    |     |
|      | Consumer advisory for raw or undercooked foods<br>Licensed health care facilities/schools: prohibited foods no                                 | at being offered                |   |       |    |                               |             |                    |                              | X    |     |
|      | Hot and cold water available   | or being ollered                |   |       | Х  |                               |             |                    |                              | ^    |     |
|      | Sewage and wastewater properly disposed  |                                 |   |       | X  |                               |             |                    |                              |      |     |
| _    | No rodents, insects, birds, or animals   |                                 |   |       |    |                               | Х           |                    |                              |      |     |
|      | OOD RETAIL PRACTICES   |                                 |   |       |    |                               | Λ           |                    |                              | OUT  | cos |
|      |  |                                 |   |       |    |                               |             | 00.                | -                            |      |     |
|      | Person in charge present and performing duties Proper personal cleanliness and hair restraints   |                                 |   |       |    |                               |             |                    |                              |      |     |
|      | Approved thawing methods used; frozen food   |                                 |   |       |    |                               |             |                    |                              |      |     |
|      | 7 Food separated and protected   |                                 |   |       |    |                               |             |                    |                              |      |     |
|      | Fruits and vegetables washed   |                                 |   |       |    |                               |             |                    |                              |      |     |
|      | 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   |                                 |   |       |    |                               |             |                    |                              |      |     |
|      | Equipment, utensils: Approved, in good repair, adequate capacity   |                                 |   |       |    |                               |             |                    |                              |      |     |
|      | Equipment, utensils, linens: Proper storage and use  |                                 |   |       |    |                               |             |                    |                              |      |     |
|      | Vending machines   |                                 |   |       |    |                               |             |                    |                              |      |     |
|      | 8 Adequate ventilation/lighting; designated areas, use   |                                 |   |       |    |                               |             |                    |                              |      |     |
|      | Thermometers provided, accurate  |                                 |   |       |    |                               |             | $ldsymbol{\sqcup}$ |                              |      |     |
|      | Wiping cloths: properly used, stored   |                                 |   |       |    |                               |             |                    |                              |      |     |
|      | Plumbing approved, installed, in good repair; proper backflow devices  |                                 |   |       |    |                               |             |                    |                              |      |     |
|      | 2 Garbage & refuse properly disposed; facilities maintained  |                                 |   |       |    |                               |             |                    |                              |      |     |
|      | Toilet facilities: properly constructed, supplied, cleaned Premises clean, in good repair; Personal/chemical storage; Adequate vermin-proofing |                                 |   |       |    |                               |             |                    |                              |      |     |
|      |  | e, Adequate vermi               | n-prooting                                |       |    |                               |             |                    |                              |      |     |
|      | Floor, walls, ceilings: built,maintained, clean  |                                 |   |       |    |                               |             |                    |                              |      |     |
| N46  | No unapproved private home/living/sleeping quarters  |                                 |   |       |    |                               |             |                    |                              |      |     |

### OFFICIAL INSPECTION REPORT

| Facility FA0209797 - WINGSTOP                                  | Site Address 5134 STEVENS CREEK BL, SAN JOSE, CA 95129 | Inspection Date<br>10/24/2023    |  |  |  |
|--|--|----------------------------------|--|--|--|
| Program PR0306936 - FOOD PREP / FOOD SVC OP 0-5 EMPLOYEES RC 2 | Owner Name           2 - FP10         LEMON WING CORP  | Inspection Time<br>15:15 - 16:15 |  |  |  |
| 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**

K01 - 3 Points - Inadequate demonstration of knowledge; food manager certification

Inspector Observations: Food Safety Certificate for Manager and food handler card for employees are not available for review. [CA] Food facilities that prepare, handle, or serve non-prepackaged potentially hazard foods shall have a valid Food Safety Certificate available for review. Employees shall have a valid food handler card within 30 days from their date of hire.

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

Inspector Observations: Drain flies observed in area by the mop sink and near the three compartment sink. [CA] Facility shall be kept free of flies. Frequently clean drains to prevent harborage of drain flies.

# **Performance-Based Inspection Questions**

All responses to PBI questions were satisfactory.

#### **Measured Observations**

| <u>Item</u>     | <u>Location</u>          | Measurement       | Comments |
|-----------------|--------------------------|-------------------|----------|
| Hot water       | Handwash sink            | 100.00 Fahrenheit |          |
| Quat sanitizer  | Three compartment sink   | 200.00 PPM        |          |
| Cheese sauce    | Hot holding in dispenser | 140.00 Fahrenheit |          |
| Raw chicken     | Ice bath by deep fryer   | 40.00 Fahrenheit  |          |
| Quat sanitizer  | Sanitizer bucket         | 200.00 PPM        |          |
| Chicken tenders | Cooked                   | 188.00 Fahrenheit |          |
| chicken wings   | Cooked                   | 201.00 Fahrenheit |          |
| Raw chicken     | Walk-in cooler           | 38.00 Fahrenheit  |          |
| Hot water       | Three compartment sink   | 120.00 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 <a href="https://www.night.com/en-algorithment/">https://www.night.com/en-algorithment/</a>. 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

Mar 14

Received By: Maria Patino

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Signed On: October 24, 2023