

# 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>FA0211100 - CINDY'S DELI                                     |  | <b>Site Address</b><br>890 EMORY ST, SAN JOSE, CA 95126 |                                           | <b>Inspection Date</b><br>11/15/2024     |                                         | <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>PR0304238 - FOOD PREP / FOOD SVC OP 0-5 EMPLOYEES RC 2 - FP10 |  |                                                         | <b>Owner Name</b><br>SAING, CINDY SOPHEAP |                                          | <b>Inspection Time</b><br>10:35 - 11:15 |                                                                                                                                                                |  |                                     |  |
| <b>Inspected By</b><br>MAMAYE KEBEDE                                            |  | <b>Inspection Type</b><br>ROUTINE INSPECTION            |                                           | <b>Consent By</b><br>CINDY SOPHEAP SAING |                                         |                                                                                                                                                                |  | <b>FSC</b> Cindy Saing<br>3/25/2026 |  |
|                                                                                 |  |                                                         |                                           |                                          |                                         |                                                                                                                                                                |  |                                     |  |

  

| 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   |     | S   |
| 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                              | X   |     |
| K35                   | Equipment, utensils: Approved, in good repair, adequate capacity                    | X   |     |
| K36                   | Equipment, utensils, linens: Proper storage and use                                 |     |     |
| K37                   | Vending machines                                                                    |     |     |
| K38                   | Adequate ventilation/lighting; designated areas, use                                |     |     |
| K39                   | Thermometers provided, accurate                                                     |     | X   |
| 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 | X   |     |
| 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>PR0304238 - FOOD PREP / FOOD SVC OP 0-5 EMPLOYEES RC 2 - FP10 | Owner Name<br>SAING, CINDY SOPHEAP               | Inspection Time<br>10:35 - 11:15 |
| 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

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

**Inspector Observations: Repeated violation: Boxes and sacks of different food products on boxes were stored on the floor back in the preparation 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 approved shelf or dunnage rack.**

K34 - 2 Points - Warewashing facilities: not installed or maintained; no test strips; 114067(f,g), 114099, 114099.3, 114099.5, 114101(a), 114101.1, 114101.2, 114103, 114107, 114125

**Inspector Observations: The sanitizer measuring strips are all expired.**

**[CA] Provide new and approved sanitizer measuring strips.**

K35 - 2 Points - Equipment, utensils - Unapproved, unclean, not in good repair, inadequate capacity; 114130, 114130.1, 114130.2, 114130.3, 114130.4, 114130.5, 114132, 114133, 114137, 114139, 114153, 114155, 114163, 114165, 114167, 114169, 114175, 114177, 114180, 114182

**Inspector Observations: The open top white freezer stored behind the counter is not NSF/ANSI approved or ETL/UL Sanitation listed one.**

**[CA] All equipment used in the facility must be NSF/ANSI approved or ETL/UL Sanitation listed one.**

K39 - 2 Points - Thermometers missing or inaccurate; 114157, 114159

**Inspector Observations: There was not a functional prob thermometer to measure the internal temperature of the cold and hot food products.**

**[CA] Provide an approved prob type thermometer and use it with a regular calibration and sanitization.**

K44 - 2 Points - Premises not clean, not in good repair; No personal/chemical storage; inadequate vermin-proofing; 114067(j), 114123, 114143 (a,b), 114256, 114256.1, 114256.2, 114256.4, 114257, 114257.1, 114259, 114259.2, 114259.3, 114279, 114281, 114282

**Inspector Observations: Couple of open cup employee drinks were stored on the preparation tables.**

**[CA] To prevent possible contamination, employees may only drink with covered cup container and store their drink in designated areas.**

### Performance-Based Inspection Questions

All responses to PBI questions were satisfactory.

### Measured Observations

| Item                 | Location             | Measurement       | Comments |
|----------------------|----------------------|-------------------|----------|
| Cheese pizza         | Hot case             | 138.00 Fahrenheit |          |
| Rosted beef sandwich | Hot case             | 138.00 Fahrenheit |          |
| Diced tomato         | Preparation fridge   | 39.00 Fahrenheit  |          |
| Sliced turkey        | Preparation fridge   | 37.00 Fahrenheit  |          |
| Pepperoni pizza      | Hot case             | 140.00 Fahrenheit |          |
| Hot water            | Two compartment sink | 125.00 Fahrenheit |          |

### Overall Comments:

**Note: 1. Food safety certificate : Cindy Saing - 3/25/2026**

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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 **11/29/2024**. 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 |



Received By: CINDY SOPHEAP SAING  
Owner

Signed On: November 15, 2024