

# 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>FA0255490 - PANADERIA MI TIERRA COLOMBIAN BAKERY             |  | <b>Site Address</b><br>3054 ALUM ROCK AV C, SAN JOSE, CA 95127 |                                             | <b>Inspection Date</b><br>10/30/2024 |                                         | <b>Placard Color &amp; Score</b><br><div style="background-color: green; color: white; padding: 10px; text-align: center;"> <b>GREEN</b><br/> <b>86</b> </div> |  |                          |
| <b>Program</b><br>PR0373103 - FOOD PREP / FOOD SVC OP 0-5 EMPLOYEES RC 2 - FP10 |  |                                                                | <b>Owner Name</b><br>DIEGO ARMANDO TRUJILLO |                                      | <b>Inspection Time</b><br>15:00 - 16:10 |                                                                                                                                                                |  |                          |
| <b>Inspected By</b><br>MAMAYE KEBEDE                                            |  | <b>Inspection Type</b><br>ROUTINE INSPECTION                   |                                             | <b>Consent By</b><br>DIEGO           |                                         |                                                                                                                                                                |  | <b>FSC</b> Not Available |

  

| 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  |       |       |        |     |     | N   |
| 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   |     | N   |
| 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                                    | 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                    | X   |     |
| K36                   | Equipment, utensils, linens: Proper storage and use                                 |     |     |
| K37                   | Vending machines                                                                    |     |     |
| K38                   | Adequate ventilation/lighting; designated areas, use                                | X   |     |
| 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                                      |     |     |

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|                                                                          |                                   |                                                         |                                  |
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| Program<br>PR0373103 - FOOD PREP / FOOD SVC OP 0-5 EMPLOYEES RC 2 - FP10 |                                   | Owner Name<br>DIEGO ARMANDO TRUJILLO REYES              | Inspection Time<br>15:00 - 16:10 |
| 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:** *There is not a food safety manager certified person in the facility.*

**[CA]** *Someone from the facility must take a food safety certificate class within two months and keep copy of the certificate on file.*

**Food Safety Manager certificate class may be taken on the following websites:**

**1. Premier Food Safety:**

<https://www.premierfoodsafety.com/food-manager-certification/california>

**2. Learn 2 Serve:**

<https://www.360training.com/learn2serve/food-safety-manager/California>

**3. Serve Safe Manager:**

<https://www.servsafe.com/ServSafe-Manager>

K07 - 3 Points - Improper hot and cold holding temperatures; 11387.1, 113996, 113998, 114037, 114343(a)

**Inspector Observations:** *Dozen of eggs on the preparation table were measured between 45 oF and 50 oF.*

**[CA]** *Shell eggs must be stored at or below 45 oF at all the time.*

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:** *Some open bag food products were stored on the shelf of in the dry storage area.*

**[CA]** *Store all open bag food products in properly labeled bulk containers.*

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 areas.*

**[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.*

**Some food products were stored on the make-shift storage area located in the back of the facility.**

**[CA]** *Do not store any food product outside the facility.*

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.*

K38 - 2 Points - Inadequate ventilation and lighting in designated area; 114149, 114149.1, 114149.2, 114149.3, 114252, 114252.1

**Inspector Observations:** *A tabletop miniature deep fryer was observed back in the preparation area.*

**[CA]** *All utensils and equipment shall be certified or classified for sanitation by an American National Standards Institute (ANSI) accredited certification program (e.g., NSF, UL EPH, UL Sanitation, CSA Sanitation, or ETL Sanitation). Remove the tabletop miniature deep fryer. Contact this divisions Plan Check program for review and approval of equipment prior to installation. Furthermore, all equipment that uses gas/electricity and produces steam, grease, and excessive heat must be stored under the exhaust hood.*

### Performance-Based Inspection Questions

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|                                                                          |                                                         |                                  |
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Needs Improvement - Food contact surfaces clean, sanitized.

Needs Improvement - Hands clean/properly washed/gloves used properly.

## Measured Observations

| Item       | Location               | Measurement       | Comments |
|------------|------------------------|-------------------|----------|
| Shell eggs | Preparation area       | 49.00 Fahrenheit  |          |
| Shell eggs | Upright fridge         | 38.00 Fahrenheit  |          |
| Ham        | Open top freezer       | 0.00 Fahrenheit   |          |
| Hot water  | Three compartment sink | 125.00 Fahrenheit |          |

## Overall Comments:

**Note: Food safety manager certificate: There is not food safety manager certified person in the facility.**

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 **11/13/2024**. 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: Diego Trujillo  
Owner  
Signed On: October 30, 2024