



Mobile Food Inspection Report

County of San Diego, Department of Environmental Health
P.O. Box 129261, San Diego, CA 92112-9261
(858) 505-6900 (800) 253-9933 www.sdcdeh.org

Inspection Date: **01/26/2021**
Record ID: **DEH2021-FFMP-001918**
Business Type:
Guidesheet ID: **PC ROUTINE-CONSULT**
Inspection Sequence Number:

Record Name POMODORO ROSSO		City SAN DIEGO	Zip 92123	Inspection Type Routine
Address 9341 RUFFIN CT				
Owner POMODORO ROSSO		Inspection Status Complete		
Record Status Application In-Review	Record Expiration Date 01/07/2021	Time		

RISK FACTORS AND INTERVENTIONS

In = In Compliance Out = Out of Compliance N/O = Not Observed N/A = Not Applicable
MAJ OUT = Major Violation Observed MIN OUT = Minor Violation Observed COS = Corrected on Site SA = Suitable Alternative PTS = Points

DEMONSTRATION OF KNOWLEDGE					MAJ OUT	MIN OUT	COS SA	PTS	PTS EARNED
N/O	1a. Food Safety Certification & Exp Obtain within 60 days					<input type="checkbox"/>		2	2
N/O	1b. Food Handler Training					<input type="checkbox"/>		2	2
EMPLOYEE HEALTH AND HYGIENIC PRACTICES									
N/O	2. Communicable Disease- Reporting, Restrictions or Exclusions				<input type="checkbox"/>			4	4
In	3. No discharge from eyes, nose or mouth				<input type="checkbox"/>			2	2
In	4. Proper eating, tasting, drinking or tobacco use					<input type="checkbox"/>		2	2
PREVENTING CONTAMINATION BY HANDS									
In	5. Hands clean and properly washed; gloves used properly				<input type="checkbox"/>			4	4
In	6. Adequate handwashing facilities supplied and accessible				<input type="checkbox"/>	<input type="checkbox"/>		4/2	4
TIME AND TEMPERATURE RELATIONSHIPS									
N/O	7. Proper hot and cold holding temperatures <input type="checkbox"/> Hot <input type="checkbox"/> Cold				<input type="checkbox"/>	<input type="checkbox"/>		6/2	6
N/A	8. Time as a Public Health Control - procedures and records available				<input type="checkbox"/>	<input type="checkbox"/>		4/2	4
N/O	9. Proper cooling methods / Not allowed in Limited Food Preparation MFF				<input type="checkbox"/>			4	4
N/O	10. Proper cooking time and temperatures				<input type="checkbox"/>			4	4
N/O	11. Proper reheating procedure for hot holding; for limited food prep, food cooked to order				<input type="checkbox"/>			4	4
PROTECTION FROM CONTAMINATION									
N/O	12. No returned and reserve of food; For Limited Food Prep, no portioning of food					<input type="checkbox"/>		2	2
N/O	13. Food in good condition, safe and unadulterated				<input type="checkbox"/>	<input type="checkbox"/>		4/2	4
N/O	14. Food contact surfaces clean and sanitized <input type="checkbox"/> Chlorine <input checked="" type="checkbox"/> Quat <input type="checkbox"/> Iodine <input type="checkbox"/> High Temp Location & Concentration/Temp Available				<input type="checkbox"/>	<input type="checkbox"/>		4/2	4
FOOD FROM APPROVED SOURCES									
N/O	15. Food obtained from approved source; Compliance with specialized process				<input type="checkbox"/>			4	4
N/A	16. Compliance with shell stock tags, condition, display <input type="checkbox"/> Oysters <input type="checkbox"/> Mussels <input type="checkbox"/> Clams <input type="checkbox"/> Other				<input type="checkbox"/>			4	4
N/A	17. Compliance with Gulf Oyster Regulations				<input type="checkbox"/>			4	4
CONSUMER ADVISORY									
N/A	18. Consumer advisory provided for raw or undercooked foods <input type="checkbox"/> Variance <input type="checkbox"/> Specialized Process <input type="checkbox"/> HACCP Plan					<input type="checkbox"/>		2	2
POTABLE WATER / HOT WATER									
In	19. Potable hot and cold water available Handsink: 116 Warewashing sink: 120				<input type="checkbox"/>	<input type="checkbox"/>		4/2	4
LIQUID WATER DISPOSAL									
N/O	20. Toilet and handwashing sink facility readily available					<input type="checkbox"/>		2	2
In	21. No waste water discharge to the ground; Sewage system and components maintained				<input type="checkbox"/>	<input type="checkbox"/>		4/2	4
VERMIN									
In	22. No rodents, insects, birds or animals				<input type="checkbox"/>	<input type="checkbox"/>		4/2	4

SUPERVISION / PERSONAL CLEANLINESS					OUT	PTS	PTS EARNED
23.	Person in charge present and performs duties; Personal cleanliness and hair restraints				<input type="checkbox"/>	1	1
GENERAL FOOD SAFETY REQUIREMENTS							
24.	Approved thawing methods used, frozen food				<input type="checkbox"/>	1	1
25.	Food separated and protected; Limited Food Prep in food compartment				<input type="checkbox"/>	1	1
26.	Fruits and vegetables washed				<input type="checkbox"/>	1	1
27.	Toxic substances properly identified, stored, used				<input type="checkbox"/>	1	1
FOOD / STORAGE / DISPLAY / SERVICE							
28.	Food storage / containers identified; food stored, displayed, served from mobile food facility adequate food preparation area				<input type="checkbox"/>	1	1
29.	Food properly labeled and honestly presented				<input type="checkbox"/>	1	1
EQUIPMENT / UTENSILS / LINENS							
30.	Warewashing facilities - installed, maintained, used; Test strips available				<input type="checkbox"/>	1	1
31.	Non-food contact surfaces clean				<input type="checkbox"/>	1	1
32.	Wiping clothes - properly used, stored				<input type="checkbox"/>	1	1
33.	Commissary / Mobile Support Unit - equipped, maintained				<input type="checkbox"/>	1	1
34.	Equipment / Utensils - approved, installed, good repair, capacity; Equipment / Utensils / Linens - storage, use				<input type="checkbox"/>	1	1
35.	Thermometers - provided, accurate				<input type="checkbox"/>	1	1
36.	Adequate ventilation / lighting - designated areas, use				<input type="checkbox"/>	1	1
PHYSICAL FACILITIES							
37.	Premises, personal / cleaning items, vermin-proofing; Garbage and refuse - properly disposed; Facilities maintained - clean surroundings				<input type="checkbox"/>	1	1
38.	Plumbing - proper backflow devices / water tank design and accessibility				<input type="checkbox"/>	1	1
39.	Compliance with fire safety requirements - first aid kit, emergency exit, self-closing lid on fryer				<input type="checkbox"/>	1	1
40.	Floors, walls and ceilings - built, maintained, clean; Unobstructed height of at least 74" and 30" horizontal aisle space for occupied MFFs				<input type="checkbox"/>	1	1
NOTIFICATION REQUIREMENTS							
41.	Grade card, signs, last inspection report available; Written operational procedures available and followed; Restroom letter of agreement				<input type="checkbox"/>	1	1
42.	Proper identification on vehicle / cart				<input type="checkbox"/>	1	1

Inspection Score: **100%**
Grade: **A**

Facility Information

Location:	Non-HQ	Location Address	COC
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ITEM	LOCATION	TEMP (° F)	ITEM	LOCATION	TEMP (° F)
Ambient temperature	Turbo Air 2-door	39	Ambient temperature	Upright Turbo Air 1-door	39
Ambient temperature	True Air 1-door	38	Ambient temperature	True Air 2-glassdoor	36


Observations and Corrective Actions

Routine

PC ROUTINE-CONSULT

Health final is approved for mobile food processing vehicle (FB15). Grade card posted. Decals affixed. Obtain all necessary permits and approvals from other applicable enforcement agencies.

For up to date information about COVID-19, including resource documents such as frequently asked questions, informational posters, and guidance, please visit www.coronavirus-sd.com.

Received By	Emailed to Matteo Betti	Signature		Title	Owner
Specialist	Muriel Galsim	Signature		Phone	858-505-6762