



IMPERIAL COUNTY

PUBLIC HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH

Permit

This is to certify that the facility shown on this permit has complied with the rules and regulations of this department, and is hereby granted permission to operate the type of facility indicated.

Facility ID # FA0002827

FACILITY PERMITTED

IMPERIAL VALLEY COLLEGE
380 E ATEN Rd
IMPERIAL, CA 92251

OWNER ON RECORD

IMPERIAL VALLEY COLLEGE
PO Box 158
IMPERIAL, CA 92251

ISSUED FOR

Recreational Health Fee Exempt
DEEP POOL

PERMIT NUMBER

PT0003696

DATE ISSUED

01/01/2016

PERMIT EXPIRES

12/31/2016

VALIDATED

JAN 01 2016

County of Imperial
Division of
Environmental Health

IN THE EVENT A FACILITY IS 1) EXTENSIVELY REMODELED, OR 2) A CHANGE OF OWNERSHIP OCCURS, OR 3) THE NATURE OF THE OPERATION CHANGES, YOU MUST NOTIFY THE IMPERIAL COUNTY, PUBLIC HEALTH DEPARTMENT AT 442-265-1888 .

THIS PERMIT IS NON-TRANSFERABLE AND MUST BE DISPLAYED IN A PROMINENT LOCATION

THIS PERMIT MUST BE PROMINENTLY DISPLAYED WITHIN THE PERMITTED FACILITY

PLEASE FORWARD THIS PERMIT TO THE FACILITY SHOWN BELOW

IMPERIAL VALLEY COLLEGE
380 E ATEN Rd
IMPERIAL, CA 92251

DATE PRINTED : 12/11/2015
INVOICE # : IN0002550

IMPERIAL VALLEY COLLEGE
IMPERIAL VALLEY COLLEGE
PO BOX 158
IMPERIAL, CA 92251



IMPERIAL COUNTY

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DIVISION OF ENVIRONMENTAL HEALTH

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380 E ATEN Rd
IMPERIAL, CA 92251

OWNER ON RECORD

IMPERIAL VALLEY COLLEGE
PO Box 158
IMPERIAL, CA 92251

ISSUED FOR

Recreational Health Fee Exempt
SHALLOW POOL

PERMIT NUMBER

PT0003697

DATE ISSUED

01/01/2016

PERMIT EXPIRES

12/31/2016

VALIDATED

JAN 01 2016

County of Imperial
Division of
Environmental Health

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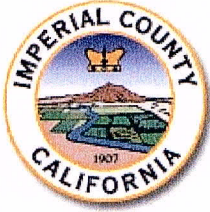
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380 E ATEN Rd
IMPERIAL, CA 92251

DATE PRINTED : 12/11/2015
INVOICE # : IN0002550

IMPERIAL VALLEY COLLEGE
IMPERIAL VALLEY COLLEGE
PO BOX 158
IMPERIAL, CA 92251



**AIR POLLUTION CONTROL DISTRICT
2016 APCD PERMIT RENEWAL**

Facility name and mailing address:

IMPERIAL COMMUNITY COLLEGE
380 E. ATEN RD.
IMPERIAL, CA 92251

Permit Number: 2192 OPEN
Active

Permit Type: OPEN BURN

Location Address: 380 E. ATEN RD.
IMPERIAL, CA 92251

FEE FOR THE YEAR: **\$180.50**

Resp. Agent: RICK WEBSTER
Phone: (760) 355-6371

TOTAL PAID: **\$0.00**

Issued: 1/1/2016

BALANCE DUE: **\$180.50**

Expires: 12/31/2016

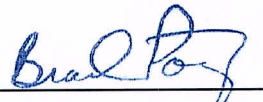
CERTIFICATION BY AUTHORIZED AGENT

The permit presented here is correct. The authorizations, certifications, and information from the application and permit being renewed, remain valid and will be kept with this ANNUAL PERMIT RENEWAL.

DATE 12-14-15 SIGNATURE 

CERTIFICATION BY APCD OFFICER

The permit becomes valid when signed by authorized agent.



This permit, or an approved facsimile, shall be mounted so as to be clearly visible in an accessible place within 25 feet of the article, machine, equipment, or other contrivance, or maintained readily available at all times on the operating premises. (Rule 201D).

KEEP THIS COPY FOR POSTING

**150 South 9th Street, El Centro, CA 92243-2801
(442)-265-1800**



**AIR POLLUTION CONTROL DISTRICT
2016 APCD PERMIT RENEWAL**

Facility name and mailing address:

IMPERIAL VALLEY COLLEGE
380 E. ATEN ROAD
IMPERIAL, CA 92251

FEE FOR THE YEAR **\$459.00**

BALANCE DUE **\$459.00**

Permit Number: **2686 PTO**
Active

Permit Type **NON-RETAIL SS**

Location Address **380 E. ATEN ROAD**
IMPERIAL, CA 92251

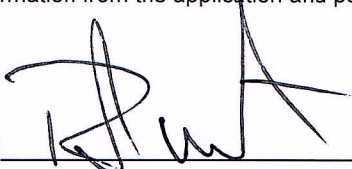
Resp. Agent **RICK WEBSTER**
Phone **355-6371**

Issued: **1/1/2016**
Expires: **12/31/2016**

CERTIFICATION BY AUTHORIZED AGENT

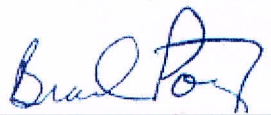
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**AIR POLLUTION CONTROL DISTRICT
2016 APCD PERMIT RENEWAL**

Facility name and mailing address:

IMPERIAL VALLEY COLLEGE
380 E. ATEN ROAD
IMPERIAL, CA 92251

FEE FOR THE YEAR **\$361.00**

BALANCE DUE **\$361.00**

Permit Number: **3260 PTO**
Active

Permit Type **COMBUSTION**

Location Address **WATER PLANT, 380 E. ATEN
IMPERIAL, CA 92251**

Resp. Agent **RICK WEBSTER**
Phone **355-6371**

Issued: **1/1/2016**
Expires: **12/31/2016**

CERTIFICATION BY AUTHORIZED AGENT

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DATE 12-14-15

SIGNATURE

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IMPERIAL COUNTY PUBLIC HEALTH DEPARTMENT
 DIVISION OF ENVIRONMENTAL HEALTH
OFFICIAL RETAIL FOOD INSPECTION REPORT

797 Main Street, Suite B, El Centro CA 92243

www.icphd.org

Facility Name: CHIPS & SALSA @ IVC	Date: 12/10/2015
Address: 380 E ATEN Rd	

No. 37 Equipment/Utensils - approved; installed; clean; good repair; capacity **GOOD RETAIL PRACTICE VIOLATIONS**

Points
1

Compliance date not specified

Inspector Comments:

Repair the cracked and moldy cupboard under the orchata dispenser.

where water leak is

Not In Compliance

Violation Description: All utensils and equipment shall be fully operative and in good repair. (114175). All utensils and equipment shall be approved, installed properly, and meet applicable standards. (114130, 114130.1, 114130.2, 114130.3, 114130.4, 114130.5, 114132, 114133, 114137, 114139, 114153, 114155, 114165, 114167, 114169, 114177, 114180, 114182). After cleaning and sanitizing, EQUIPMENT and UTENSILS shall be air dried or used after adequate draining before contact with FOOD and shall not be cloth dried, except that UTENSILS that have been air dried may be polished with cloths that are maintained clean and dry (114105). Except as specified in subdivision (b), all PERMANENT FOOD FACILITIES that wash, rinse, soak, thaw, or similarly prepare FOODs shall be provided with a FOOD PREPARATION sink and meet applicable standards (114163).

No. 41 Thermometers provided and accurate **GOOD RETAIL PRACTICE VIOLATIONS**

Points
1

Compliance date not specified

Inspector Comments: Repair/replace burned out lights in warewashing area and kitchen.

Nick did this already

Not In Compliance

Violation Description: An accurate easily readable metal probe thermometer suitable for measuring temperature of food shall be available to the food handler. A thermometer +/- 2 °F shall be provided for each hot and cold holding unit of potentially hazardous foods and high temperature warewashing machines. (114157, 114159)

OVERALL INSPECTION COMMENTS

Facility is consistently operated with great food service safety. New fryers, convection oven, and grills have been installed.

The listed violation(s) have been explained to the Person in Charge/Owner and are to be corrected immediately unless otherwise noted. Failure to correct the listed violation(s) prior to the designated compliance date may necessitate an additional inspection, which may be assessed at the Division's hourly rate.

Mark Au

Person in Charge/Owner
Signature

Sema Samkey

Inspector's Signature



IMPERIAL COUNTY PUBLIC HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH
OFFICIAL RETAIL FOOD INSPECTION REPORT

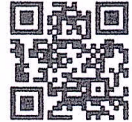
797 Main Street, Suite B, El Centro CA 92243

www.icphd.org

Facility Name: CHIPS & SALSA @ IVC		Inspection Date: 12/10/2015	
Owner/Permittee: CHIPS & SALSA @ IVC JAIME ARIAS			
Address: 380 E ATEN Rd		City/Zip: IMPERIAL, CA 92251	
Facility Email Address: jaime.arias@imperial.edu		Phone #: 7603356319	Fax #:
Person In Charge:		Program Identifier: (2,640 SF), CAFETERIA WITH OUTDOOR GRILL	
Inspector's Name: TRINA HAMBY		Service: ROUTINE INSPECTION	
Time In: 10:00 AM	Time Out: 10:45 AM	Result: MINOR VIOLATIONS	
FA: FA0001368	PR: PR0002051	Action: VIO. MUST BE CORRECTED PRIOR TO	

GRADE
Score 98

Score 98



- IN = In compliance N/A = Not applicable N/O = Not observed COS = Corrected on-site
 Out = Items not in compliance MAJ = Major Violation MIN = Minor Violation

RISK FACTORS AND INTERVENTIONS						
The following pose a threat to public health and must be corrected immediately.						
EMPLOYEE HEALTH, HYGIENE & KNOWLEDGE	IN	N/A	N/O	COS	OUT	
					Maj	Min
1. Demonstration of knowledge	<input checked="" type="checkbox"/>					2
2. Food safety certification	<input checked="" type="checkbox"/>					2
3. Communicable disease; reporting, restrictions & exclusions	<input checked="" type="checkbox"/>				4	
4. No discharge from eyes, nose and mouth	<input checked="" type="checkbox"/>					2
5. Proper eating, drinking, or tobacco use	<input checked="" type="checkbox"/>					2
PREVENT CONTAMINATION BY HANDS						
6. Hands clean and properly washed; proper glove use	<input checked="" type="checkbox"/>				4	2
7. Adequate hand washing facilities; supplied and accessible	<input checked="" type="checkbox"/>					2
TIME AND TEMPERATURE RELATIONSHIPS						
8. Proper hot and cold holding temperatures	<input checked="" type="checkbox"/>				4	2
9. Time as a public health control; procedures & records	<input checked="" type="checkbox"/>				4	2
10. Proper cooling methods	<input checked="" type="checkbox"/>				4	2
11. Proper cooking time and temperature	<input checked="" type="checkbox"/>				4	
12. Proper reheating procedures for hot holding	<input checked="" type="checkbox"/>				4	
PROTECTION FROM CONTAMINATION						
13. Returned and re-service of food	<input checked="" type="checkbox"/>					2
14. Food in good condition, safe and unadulterated	<input checked="" type="checkbox"/>				4	2
15. Food contact surface; clean and sanitized	<input checked="" type="checkbox"/>				4	2
FOOD FROM APPROVED SOURCES						
16. Food obtained from approved source	<input checked="" type="checkbox"/>				4	2
17. Compliance with shell stock tags, condition, display	<input checked="" type="checkbox"/>					2
18. Compliance with Gulf Oyster Regulations	<input checked="" type="checkbox"/>					2
ADDITIONAL RISK FACTORS						
19. Compliance with variance, specialized process & HACCP	<input checked="" type="checkbox"/>					2
20. Consumer advisory provided for raw/undercooked food	<input checked="" type="checkbox"/>					2
21. Licensed health care facilities/public & private schools: prohibited foods not offered	<input checked="" type="checkbox"/>				4	
22. Hot and cold water available	<input checked="" type="checkbox"/>				4	2
23. Sewage and wastewater properly disposed	<input checked="" type="checkbox"/>				4	2
24. No rodents, insects, birds, or animals present	<input checked="" type="checkbox"/>				4	2

GOOD RETAIL PRACTICES	
SUPERVISION	OUT
25. Person in charge present and performs duties	1
26. County Health Card - current and available	1
27. Personal cleanliness and hair restraints	1
GENERAL FOOD SAFETY REQUIREMENTS	
28. Approved thawing methods used, frozen food	1
29. Food separated and protected	1
30. Washing fruits and vegetables	1
31. Toxic substances properly identified, stored and used	1
32. Food storage; food storage containers identified	1
33. Consumer self service	1
34. Food properly labeled & honestly presented	1
EQUIPMENT/UTENSILS/LINENS	
35. Nonfood-contact surfaces clean	1
36. Warewashing facilities: installed, maintained, used; test strips/equipment	1
37. Equipment/utensils approved; installed; good repair; capacity	1
38. Equipment, utensils and linens: storage and use	1
39. Vending machines	1
40. Adequate ventilation and lighting; designated areas, use	1
41. Thermometers provided and accurate	1
42. Wiping cloths; properly used and stored	1
PHYSICAL FACILITIES	
43. Plumbing; proper backflow devices	1
44. Garbage and refuse properly disposed; facilities maintained	1
45. Toilet facilities: properly constructed, supplied, cleaned	1
46. Premises; personal/cleaning items; vermin proofing	1
47. Floors, walls and ceiling: properly built, maintained, and clean	1
48. No unapproved private homes / living or sleeping quarters	1
SIGNS/REQUIREMENTS	
49. Signs posted; last inspection report available; current health permit	1

COMPLIANCE & ENFORCEMENT			
	OUT		OUT
50. Plan review		52. Impoundment/VC&D	
51. Health Permit		53. Permit Suspension	

 Person in Charge/Owner
 Signature

 Inspector's Signature