

# FOOD FACILITY INSPECTION REPORT

## GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

247 North Villa Avenue, Willows, CA 95988  
Phone (530) 934-6102 FAX (530) 934-6103

Name of Facility/ DBA: <u>Willows Shell</u>		Inspection Date: <u>10/23/19</u>	
Address: <u>1300 W. WOOD ST., WILLOWS</u>		Reinspection Date (on or after): <u>NEXT INSPECTION</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee:	Phone No.:	Inspection Time: <u>4:00</u>	Permit Exp. Date:
Certified Food Handler: <u>PRE-PACKAGED ONLY</u>		Certificate Expiration Date: <u>        </u> <small>(Certificate expires five years after it is issued)</small>	
Service: <input checked="" type="checkbox"/> Routine Inspection <input type="checkbox"/> Reinspection <input type="checkbox"/> Complaint <input type="checkbox"/> Construction/Pre-opening <input type="checkbox"/> Other:			
Applicable Law <u>CALIFORNIA RETAIL FOOD CODE ("CalCode), Beginning with section 113700, California Health and Safety Code</u> (See reverse side of sheet for summary)			

In = In compliance    N/A = Not Applicable    N/O = Not Observed    Maj = Major violation    Out = Items not in compliance    COS = Corrected On Site			Critical Risk Factors for Disease			Maj	Out	COS				Out	COS
In			1. Demonstration of knowledge						24. Person in charge present and performs duties				
In			2. Communicable disease restrictions						25. Personal cleanliness and hair restraints				
In		N/O	3. Discharge of eyes, nose, mouth						26. Approved thawing methods used				
In		N/O	4. Eating, tasting, drinking, tobacco use						27. Food separated and protected				
In		N/O	5. Hands clean & properly washed, glove use						28. Washing fruits and vegetables				
In			6. Handwashing facilities available				X		29. Toxic substances properly identified, stored and used				
In	N/A	N/O	7. Proper hot and cold food holding temps						30. Food storage, 31. Self service, 32. Labeled				
In	N/A		8. Time as a public health control, records						33. Nonfood contact surfaces clean				
In	N/A	N/O	9. Proper cooling methods						34. Warewashing facilities maintained, test strips				
In	N/A	N/O	10. Proper cooking time and temps						35. Equipment, utensils, approved, clean good repair				
In	N/A	N/O	11. Reheating temperature for hot holding						36. Equipment, utensils and linens, storage and use				
In	N/A	N/O	12. Returned and reservice of food						37. Vending Machines				
In			13. Food safe and unadulterated						38. Adequate ventilation and lighting				
In	N/A	N/O	14. Food contact surfaces clean and sanitized						39. Thermometers provided and accurate				
In			15. Food from approved source						40. Wiping cloths properly used and stored				
In	N/A	N/O	16. Shell stock tags, 17. Gulf Oyster regs						41. Plumbing, proper backflow prevention				
In	N/A	N/O	18. Compliance with HACCP plan						42. Garbage properly disposed; facilities maintained				
In	N/A	N/O	19. Advisory for raw/undercooked food						43. Toilet facilities supplied, properly constructed, clean				
In	N/A		20. Health care/ School prohibited food						44. Premises clean, vermin proof; personal items separate				
In			21. Hot & cold water. Temp: <u>113</u> °F				X		45. Floors, walls and ceilings maintained and clean				
In			22. Wastewater properly disposed						46. No unapproved living or sleeping quarters				
In			23. No rodents, insects, birds, animals						47. Signs posted; Permit & inspection report available				
									48. Plan Review Required				

No PHF <input checked="" type="checkbox"/>					
°F	Food	Location	°F	Food	Location

Comments: VIOLATIONS:

⑥ PROVIDE HAND TOWELS OR AN OPERATIONAL HAND DRYER ~~AT~~ AT THE HAND WASH SINK. REPEAT VIOLATION!

②1 HOT WATER OF AT LEAST 120°F SHALL BE SUPPLIED TO THE 3-COMPARTMENT SINK AT ALL TIMES. SINK MEASURED 113°F. REPEAT VIOLATIONS!

\* CORRECT ABOVE IMMEDIATELY.

Received By: [Signature] REHS: ANDREW PERGO