

FOOD FACILITY INSPECTION REPORT

GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

225 N. Tehama Street, Willows, CA 95988
Phone (530) 934-6102 FAX (530) 934-6103

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Name of Facility/ DBA: <u>Oh Bees Hive</u>		Inspection Date: <u>12/8/21</u>	
Address: <u>730 5th St, Orland, CA 95963</u>		Reinspection Date (on or after): <u>Next Inspection</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permitee: <u>Oliver & Honey Bees</u>	Phone No.: <u>865-8000</u>	Inspection Time: <u>3:50 pm</u>	Permit Exp. Date:
Certified Food Handler: <u>Melinda Ritchard</u>		Certificate Expiration Date: <u>3/5/25</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 CALIFORNIA RETAIL FOOD CODE ("CalCode), Beginning with section 113700, California Health and Safety Code (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									24. Person in charge present and performs duties		
In									25. Personal cleanliness and hair restraints		
In		N/O							26. Approved thawing methods used		
In		N/O							27. Food separated and protected		
In		N/O							28. Washing fruits and vegetables		
In									29. Toxic substances properly identified, stored and used		
In	N/A	N/O							30. Food storage, 31. Self service, 32. Labeled		
In	N/A								33. Nonfood contact surfaces clean		
In	N/A	N/O							34. Warewashing facilities maintained, test strips		
In	N/A	N/O							35. Equipment, utensils, approved, clean good repair		
In	N/A	N/O							36. Equipment, utensils and linens, storage and use		
In	N/A	N/O							37. Vending Machines		
In									38. Adequate ventilation and lighting		
In	N/A	N/O							39. Thermometers provided and accurate		
In									40. Wiping cloths properly used and stored		X
In	N/A	N/O							41. Plumbing, proper backflow prevention		X
In	N/A	N/O							42. Garbage properly disposed; facilities maintained		
In	N/A	N/O							43. Toilet facilities supplied, properly constructed, clean		
In	N/A								44. Premises clean, vermin proof, personal items separate		
In									45. Floors, walls and ceilings maintained and clean		
In					°F				46. No unapproved living or sleeping quarters		
In							X		47. Signs posted; Permit & inspection report available		
In									48. Plan Review Required		

No PHF []					
°F	Food	Location	°F	Food	Location
38	Ham	Walk in Cooler	40	Ham	Hamburger Prep Cooler
38	Beans	Salad Station Prep Cooler	145	Rice	Hot Drawer
34	Bleu Cheese	Sauce Cooler	38	Key Lime Pie	Pie Cooler
39	Hamburger	Cook's Cold Dryer	41	Milk	undercounter cooler in coffee bar

Comments:

22a) Drain keg/water to an indirect drain connection.

22b) Drain bar ice bin to an indirect drain connection.

40) Store wiping towels in sanitizer when not in use.

41) Repair leak at mop sink hot handle.

Received By: Mindy Rutch REHS: John H. Wells