

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>SUBWAY (WILLOWS)</u>		Inspection Date: <u>4/25/19</u>	
Address: <u>505 HUMBOLT AVE, WILLOWS, CA</u>		Reinspection Date (on or after): <u>NEXT INSPECTION</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permitee: <u>KIWI INC</u>	Phone No.:	Inspection Time: <u>4:00</u>	Permit Exp. Date:
Certified Food Handler: <u>DANIELLE SCHMIDT</u>		Certificate Expiration Date: <u>11/14/22</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			
<input checked="" type="checkbox"/>	In								24. Person in charge present and performs duties		
<input checked="" type="checkbox"/>	In								25. Personal cleanliness and hair restraints		
<input checked="" type="checkbox"/>	In	N/O							26. Approved thawing methods used		
<input checked="" type="checkbox"/>	In	N/O					X		27. Food separated and protected		
<input checked="" type="checkbox"/>	In	N/O							28. Washing fruits and vegetables		
<input checked="" type="checkbox"/>	In								29. Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/>	In	N/A	N/O			X	X		30. Food storage, 31. Self service, 32. Labeled		
<input checked="" type="checkbox"/>	In	N/A							33. Nonfood contact surfaces clean		
<input checked="" type="checkbox"/>	In	N/A	N/O						34. Warewashing facilities maintained, test strips		
<input checked="" type="checkbox"/>	In	N/A	N/O						35. Equipment, utensils, approved, clean good repair		
<input checked="" type="checkbox"/>	In	N/A	N/O						36. Equipment, utensils and linens, storage and use		
<input checked="" type="checkbox"/>	In	N/A	N/O						37. Vending Machines		
<input checked="" type="checkbox"/>	In								38. Adequate ventilation and lighting		
<input checked="" type="checkbox"/>	In	N/A	N/O						39. Thermometers provided and accurate		
<input checked="" type="checkbox"/>	In								40. Wiping cloths properly used and stored		
<input checked="" type="checkbox"/>	In	N/A	N/O						41. Plumbing, proper backflow prevention		
<input checked="" type="checkbox"/>	In	N/A	N/O						42. Garbage properly disposed; facilities maintained		
<input checked="" type="checkbox"/>	In	N/A	N/O						43. Toilet facilities supplied, properly constructed, clean		
<input checked="" type="checkbox"/>	In	N/A							44. Premises clean, vermin proof; personal items separate		
<input checked="" type="checkbox"/>	In								45. Floors, walls and ceilings maintained and clean		X
<input checked="" type="checkbox"/>	In								46. No unapproved living or sleeping quarters		
<input checked="" type="checkbox"/>	In								47. Signs posted; Permit & inspection report available		
									48. Plan Review Required		

No PHF []					
°F	Food	Location	°F	Food	Location
40	HAM	UNDER COUNTER FRIDGE			
135	MEATBALLS	STEAM TABLE			
51	TUNA FISH	ATOP SELF SERVE			
35	TURKEY	WALK-IN FRIDGE			

Comments: ~~CRITICAL VIOLATIONS~~

Ⓣ HOLD ALL POTENTIALLY HAZARDOUS FOOD AT/BELOW 41°F OR AT/ABOVE 135°F AT ALL TIMES. MEASURED MULTIPLE FOODS OUT OF TEMP ON THE SERVICE LINE PREP TABLE. FOOD NOT CRITICALLY OUT OF TEMPERATURE WAS RETURNED TO THE WALK-IN. THE FOLLOWING WAS DISPOSED OF BY OPERATOR:

1) 2 lbs. TUNA FISH @ 51°F 2) 1 lb COLD CUTS @ 53°F 3) 1 lb SESAME CHICKEN

Received By: Christina Gray REHS: Andrew Peryo

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Continuation Sheet

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Comments:

~~**CRITICAL VIOLATIONS (CONT.)**~~

⑦ 1 lb OF GRILLED CHICKEN. IN REFRIGERATION UNIT WAS NOT SET CORRECTLY.

OTHER VIOLATIONS

④ ALL EMPLOYEE BEVERAGES IN FOOD PREP AREAS MUST ~~BE~~ HAVE A LID OR COVERED TO PREVENT CROSS CONTAMINATION.

⑤ REPAIR BROKEN TILE ON WALL & COVING AT THE ENTRY WAY TO THE BACK KITCHEN AREA.

Received By: <u>Christina Gray</u>	REHS: <u>Andrew Perry</u>
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