### FOOD FACILITY INSPECTION REPORT

# GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT 225 N. Tehama Street, Willows, CA 95988

Page 1 of Z

- N	CE - III-/ DD		Phone (	(530) 93	4-6102	FAX (53	30) 934-6103				
Name of Facility/ DBA:								Inspection Date:			
HE LAST DANS								8/1/22			
Address:							Reinspection Date (on or after):				
414 N. TEHAMA ST., WILLOWS, CA							WEXT INSPECTION (Reinspections are subject to fees)				
Owner/Permitee:					Phone No.:			Inspection Time: Permit E	xp. Date:		
DATEY HOBBE								11:30		- 1	
Certified Food Handle:								Certificate Expiration Date:			
JIM, YODER								(Certificate expires five years after it is issued)			
Service: Routine Inspection Reinspection Complaint					□ Co	nstructio	n/Pre-opening	Other:			
Applicable Law CALIFORNIA RETAIL FOOD CODE ("CalCode), Beginning with section 113700, California Health and Safety Code (See reverse side of sheet for summary)										$\neg$	
l Ir	n = In compliar		A = Not Applicable N/O = Not Observitical Risk Factors for Disease	Maj	Maj = N	COS	lation Out = Items	not in compliance COS = Correcte	d On Site	COS	
In		1. Demonstration of knowledge		Iviaj	Out	CO3	24. Person in charge	Person in charge present and performs duties		003	
(In	(n)		2. Communicable disease restrictions					eanliness and hair restraints			
In	N/O							26. Approved thawing methods used			
(In)		N/O 4. Eating, tasting, drinking, tobacco use		-	-		27. Food separated and protected		-		
(In)	N/O		<ul><li>5. Hands clean &amp; properly washed, glove use</li><li>6. Handwashing facilities available</li></ul>					Vashing fruits and vegetables  Oxic substances properly identified, stored and used			
-	N/A N/O	7. Proper hot and cold food holding temps						ood storage, 31. Self service, 32. Labeled		$\vdash$	
In A	V/A)	8. Time as a public health control, records					33. Nonfood contact	onfood contact surfaces clean			
	V/A N/O	9. Proper cooling methods					34. Warewashing fa-	washing facilities maintained, test strips			
	N/A N/O 10. Proper cooking time and te							sils, approved, clean good repair	×		
			11. Reheating temperature for hot holding 12. Returned and reservice of food					ipment, utensils and linens, storage and use			
dn r	MA (MA)	13. Food safe and unadulterated					37. Vending Machin 38. Adequate ventila	Adequate ventilation and lighting			
	V/A N/O	14. Food contact surfaces clean and sanitized						nermometers provided and accurate			
(In)		15. Food from approved source						. Wiping cloths properly used and stored			
In N/A N/O		16. Shell stock tags, 17. Gulf Oyster regs						. Plumbing, proper backflow prevention			
In N/A N/O		18. Compliance with HACCP plan		-	-			Garbage properly disposed; facilities maintained			
In W/A N/O		Advisory for raw/undercooked food     Health care/ School prohibited food						. Toilet facilities supplied, properly constructed, clean . Premises clean, vermin proof; personal items separate			
In		21. Hot & cold water. Temp: 97 °F			×			ors, walls and ceilings maintained and clean			
		22. Wastewater properly disposed						unapproved living or sleeping quarters			
In		23. No rodents, insects, birds, animals					47. Signs posted; Permit & inspection report available				
						48. Plan Review Required					
N. D.	DD 7 3										
No PH			*		1	_					
°F	Food		Location		°F Food Location						
41	HAMBU	REFER	APTOP P. COOL	E P		j.					
41	41 Turkey War		WARK-N FRI	DGS	E						
141 Con4		Sour WARNER									
	*										
Comr	nents:		9.			1					
-NO CHITICAL VIOLATIONS											
** FACILITY IS CLEAN & WELL MAINTAINED											
Co	PRECT	- 17	HE FOLLOWING	•	S.						
21	MAIN	TAI	1 HOT WATE	ER	0		AT LEAD	ST 120° AT			
THE	E UT	ENS	ATER ONSITE		u	TI	MES. A	OPERATOR AD.	Jus	اعا	
			ESTIC APPLIAN					Z Q	WE MI	CRO	
COL	MERC	IAL	GRADE, N.	SF	. 7	PP	POYED	MODELS, WAVE	-10	rely	
Recei	ved By:	4	1-4		-   F	EHS	Long	ew teryo			

### OFFICIAL INSPECTION REPORT

### **Continuation Sheet**

## GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

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

Name of Facility / DBA:

Page 2 of 2

Inspection Date:

THE LAST STAND 8172
Address:
Owner/Permitee:
Comments:
CORRECT THE FOLLOWING
CORRECT THE FOLLOWING:  35 PEPAIR JUNCTION BOX COVER IN WALK-IN FAINGE  35 PEPAIR HANDLE FIXTURE ON BAR AND RESTROOM  HAND SINKS.
BE REPAIR HANDLE FIXTURE ON BAR AND RECTROOM
Haur Care
1
Received By: REHS: The REHS: