

**FOOD FACILITY INSPECTION REPORT**  
**GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT**

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

Name of Facility/ DBA: <i>Brewal Discount Liquor</i>		Inspection Date: <i>1/28/16</i>	
Address: <i>150 E. Walker St, Orland, CA 95963</i>		Reinspection Date (on or after): <i>Next Inspection</i> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <i>Brijit Brewal</i>	Phone No.: <i>865-4373</i>	Inspection Time: <i>2:40pm</i>	Permit Exp. Date:
Certified Food Handler: <i>- Packaged Food -</i>		Certificate Expiration Date: <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 <i>CALIFORNIA RETAIL FOOD CODE ("CalCode), Beginning with section 113700, California Health and Safety Code (See reverse side of sheet for summary)</i>			

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		1. Demonstration of knowledge					24. Person in charge present and performs duties		
<input checked="" type="checkbox"/> In		2. Communicable disease restrictions					25. Personal cleanliness and hair restraints		
<input checked="" type="checkbox"/> In	N/O	3. Discharge of eyes, nose, mouth					26. Approved thawing methods used		
<input checked="" type="checkbox"/> In	N/O	4. Eating, tasting, drinking, tobacco use					27. Food separated and protected		
<input checked="" type="checkbox"/> In	N/O	5. Hands clean & properly washed, glove use					28. Washing fruits and vegetables		
<input checked="" type="checkbox"/> In		6. Handwashing facilities available					29. Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/> In	N/A	N/O 7. Proper hot and cold food holding temps					30. Food storage, 31. Self service, 32. Labeled		
<input checked="" type="checkbox"/> In	N/A	8. Time as a public health control, records					33. Nonfood contact surfaces clean		
<input checked="" type="checkbox"/> In	N/A	N/O 9. Proper cooling methods					34. Warewashing facilities maintained, test strips		
<input checked="" type="checkbox"/> In	N/A	N/O 10. Proper cooking time and temps					35. Equipment, utensils, approved, clean good repair		
<input checked="" type="checkbox"/> In	N/A	N/O 11. Reheating temperature for hot holding					36. Equipment, utensils and linens, storage and use		
<input checked="" type="checkbox"/> In	N/A	N/O 12. Returned and reservice of food					37. Vending Machines		
<input checked="" type="checkbox"/> In		13. Food safe and unadulterated					38. Adequate ventilation and lighting		
<input checked="" type="checkbox"/> In	N/A	N/O 14. Food contact surfaces clean and sanitized					39. Thermometers provided and accurate		
<input checked="" type="checkbox"/> In		15. Food from approved source					40. Wiping cloths properly used and stored		
<input checked="" type="checkbox"/> In	N/A	N/O 16. Shell stock tags, 17. Gulf Oyster regs					41. Plumbing, proper backflow prevention		
<input checked="" type="checkbox"/> In	N/A	N/O 18. Compliance with HACCP plan					42. Garbage properly disposed; facilities maintained		
<input checked="" type="checkbox"/> In	N/A	N/O 19. Advisory for raw/undercooked food					43. Toilet facilities supplied, properly constructed, clean		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> In	N/A	20. Health care/ School prohibited food					44. Premises clean, vermin proof; personal items separate		
<input checked="" type="checkbox"/> In		21. Hot & cold water. Temp: <i>121</i> °F					45. Floors, walls and ceilings maintained and clean		
<input checked="" type="checkbox"/> In		22. Wastewater properly disposed					46. No unapproved living or sleeping quarters		
<input checked="" type="checkbox"/> In		23. No rodents, insects, birds, animals					47. Signs posted; Permit & inspection report available		
							48. Plan Review Required		

No PHF [ ]					
°F	Food	Location	°F	Food	Location
	<i>41 Burrito</i>	<i>walk-in cooler</i>			

Comments:  
*correct the following*  
 43) *Repair self-closing device on Restroom door.*

Received By: *X Brijit K. Brewal* REHS: *John H. Wells*