FOOD FACILITY INSPECTION REPORT GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

257 North Villa Avenue, Willows, CA 95988 Phone (530) 934-6102 FAX (530) 934-6103 Page 1 of

| Name of Facility/ DBA: | | | | | | Inspection Date: | |
|---------------------------------------|---|-------------------|-----------------------|-------------|--|---|------|
| Walnut Avenue Karch | | | | | | 1/3//14 | |
| Address: | | | | | | Reinspection Date (on/or after): | |
| 4646 C | Marc | Phone No.: | | | (Reinspections are subject to fees) Inspection Time: Permit Exp. Date: | | |
| Owner/Permitee: | 1 1 1 | | Phone ivo | | | Di Conso | |
| Helmuth | Helmuth & Melvin Meyer | | | | 2212 | Certificate Expiration Date: | |
| Certified Food Handle | | _ | 11.1 | 100 | 1 axes - | | |
| | | Complaint | On Con | struction | Pre-opening | (Certificate expires five years after it is issued) Other: | |
| | RNIA RETAIL FOOD CODE ("CalCode), Beginn. | | | | | (See reverse side of sheet for summary) | |
| | | | Maj = Maj | | | not in compliance COS = Corrected On S | Site |
| In = In complianc | e N/A = Not Applicable N/O = Not O Critical Risk Factors for Disease | | | COS | on Out - Items I | iot ii compilance | Out |
| In N/O | Demonstration of knowledge | | ş. | | | ge present and performs duties | |
| In N/O | Communicable disease restrictions Discharge of eyes, nose, mouth | | 4.1 4.4.1 | | 25. Personal cleanliness and hair restraints 26. Approved thawing methods used | | |
| In N/O N/O | 4. Eating, tasting, drinking, tobacco use | 7 1 5 7 6 7 6 7 6 | | | 27. Food separated and protected | | |
| In N/O | 5. Hands clean & properly washed, glove | e use | 2 | | 28. Washing fruits and vegetables | | |
| In N/A N/O | Handwashing facilities available Proper hot and cold food holding temp | | | | 29. Toxic substances properly identified, stored and used 30. Food storage, 31. Self service, 32. Dabeled | | 7 |
| In N/A N/O In N/A N/O | 8. Time as a public health control, record | | 5. | | 33. Nonfood contact surfaces clean | | |
| In N/A N/O | 9. Proper cooling methods | | ÀZ | | 34. Warewashing facilities maintained, test strips | | |
| In N/A N/O In N/A N/O | Proper cooking time and temps Reheating temperature for hot holding | o e | | | 35. Equipment, utensils, approved, clean good repair 36. Equipment, utensils and linens, storage and use | | |
| In N/A N/O | 12. Returned and reservice of food | | EAST High Marks | | 37. Vending Machines | | |
| In | 13. Food in good condition, safe, unadulte | | \$2 | | 38. Adequate ventilation and lighting 39. Thermometers provided and accurate | | |
| In N/A N/O | Food contact surfaces clean and saniti Food from approved source | ized | \$1 52 | | | provided and accurate properly used and stored | |
| In N/A N/O | 16. Shell stock tags, 17. Gulf Oyster regs | | 81 | | 41. Plumbing, prop | per backflow prevention | |
| In N/A N/O | 18. Compliance with HACCP plan | | (17) | | 42. Garbage proper | rly disposed; facilities maintained | |
| In (N/A) N/O | In N/A N/O 19. Advisory for raw/undercooked food In N/A 20. Health care/ School prohibited food | | | | 43. Toilet facilities supplied, properly constructed, clean 44. Premises clean and vermin proof; personal items separate | | |
| In 21, Hot & cold water. Temp: 120 °F | | °F | 8°4.0 | | 45. Floors, walls an | nd ceilings maintained and clean | |
| In | | | 57 | | | l living or sleeping quarters ast inspection report available | |
| In | 23. No rodents, insects, birds, animals | NEEDE BLV | à I | | 47. Signs posted; L | ast inspection report available | |
| No PHF | | | | | | | |
| °F Food | Location | | °F | | Food | Location | |
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| Comments: | | | | | | | |
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