

**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: <b>HAMILTON UNION HIGH SCHOOL</b>		Inspection Date: <b>11/20/14</b>	
Address: <b>Highway 32 &amp; 45, Hamilton City, CA</b>		Reinspection Date (on or after): <b>NEXT INSPECTION</b> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <b>HAMILTON UNION HIGH SCHOOL</b>	Phone No.:	Inspection Time: <b>11:30</b>	Permit Exp. Date:
Certified Food Handler: <b>SEAN MONTGOMERY</b>		Certificate Expiration Date: <b>10/4/17</b> <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 <b>CALIFORNIA RETAIL FOOD CODE</b> ("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
<input checked="" type="checkbox"/>			1. Demonstration of knowledge				24. Person in charge present and performs duties		
<input checked="" type="checkbox"/>			2. Communicable disease restrictions				25. Personal cleanliness and hair restraints		
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	3. Discharge of eyes, nose, mouth				26. Approved thawing methods used		
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	4. Eating, tasting, drinking, tobacco use				27. Food separated and protected		
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	5. Hands clean & properly washed, glove use				28. Washing fruits and vegetables		
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	6. Handwashing facilities available				29. Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	7. Proper hot and cold food holding temps				30. Food storage, 31. Self service, 32. Labeled		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8. Time as a public health control, records				33. Nonfood contact surfaces clean		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	9. Proper cooling methods				34. Warewashing facilities maintained, test strips		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10. Proper cooking time and temps				35. Equipment, utensils, approved, clean good repair		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	11. Reheating temperature for hot holding				36. Equipment, utensils and linens, storage and use		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12. Returned and reservice of food				37. Vending Machines		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	13. Food safe and unadulterated				38. Adequate ventilation and lighting		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14. Food contact surfaces clean and sanitized				39. Thermometers provided and accurate		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	15. Food from approved source				40. Wiping cloths properly used and stored		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16. Shell stock tags, 17. Gulf Oyster regs				41. Plumbing, proper backflow prevention		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18. Compliance with HACCP plan				42. Garbage properly disposed; facilities maintained		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	19. Advisory for raw/undercooked food				43. Toilet facilities supplied, properly constructed, clean		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	20. Health care/ School prohibited food				44. Premises clean, vermin proof; personal items separate		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	21. Hot & cold water. Temp: <b>120°F</b>				45. Floors, walls and ceilings maintained and clean		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22. Wastewater properly disposed				46. No unapproved living or sleeping quarters		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	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
39	Sausage	3-Door True Fridge			
139	Rice	Atop Steam Table			
39	Ham	Walk-in Fridge			

Comments: **\* Facility is clean & well maintained \***  
**Correct the following:**  
**30 Store all food at least 6" off of the ground. Observed tubs of ice cream on floor of walk-in freezer.**

Received By: **[Signature]** REHS: **Andrew Petyo**