

FOOD FACILITY INSPECTION REPORT

GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

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

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Name of Facility/ DBA: ELK'S LODGE		Inspection Date: 9-12/3/14	
Address: 150 S. SHASTA ST., WILLOWS		Reinspection Date (on or after): 1/3/14 <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: WILLOWS ELK LODGE	Phone No.: 934-4321	Inspection Time: 4:00	Permit Exp. Date:
Certified Food Handler: - NONE CURRENT		Certificate Expiration Date: <small>(Certificate expires five years after it is issued)</small>	
Service: <input type="checkbox"/> Routine Inspection <input checked="" type="checkbox"/> Reinspection <input type="checkbox"/> Complaint <input type="checkbox"/> Construction/Pre-opening <input type="checkbox"/> Other:			
Applicable Law CALIFORNIA RETAIL FOOD CODE ("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
In						X	X			24. Person in charge present and performs duties	
In										25. Personal cleanliness and hair restraints	
In		N/O								26. Approved thawing methods used	
In		N/O								27. Food separated and protected	
In		N/O								28. Washing fruits and vegetables	
In										29. Toxic substances properly identified, stored and used	
In	N/A	N/O								30. Food storage, 31. Self service, 32. Labeled	
In	N/A									33. Nonfood contact surfaces clean	
In	N/A	N/O								34. Warewashing facilities maintained, test strips	
In	N/A	N/O								35. Equipment, utensils, approved, clean good repair	X
In	N/A	N/O								36. Equipment, utensils and linens, storage and use	
In	N/A	N/O								37. Vending Machines	
In										38. Adequate ventilation and lighting	
In	N/A	N/O								39. Thermometers provided and accurate	
In										40. Wiping cloths properly used and stored	
In	N/A	N/O								41. Plumbing, proper backflow prevention	X
In	N/A	N/O								42. Garbage properly disposed; facilities maintained	
In	N/A	N/O								43. Toilet facilities supplied, properly constructed, clean	
In	N/A	N/O								44. Premises clean, vermin proof; personal items separate	
In										45. Floors, walls and ceilings maintained and clean	
In										46. No unapproved living or sleeping quarters	
In										47. Signs posted; Permit & inspection report available	
In										48. Plan Review Required	

No PHF [] *NO TEMPS TAKEN AT RE-INSPECTION					
°F	Food	Location	°F	Food	Location

Comments: VIOLATIONS:

① FOOD FACILITY MUST HAVE A CERTIFIED FOOD SAFETY MGR. AT ALL TIMES. SIGN UP FOR CLASS.

③5 REPAIR LEAKY PLUMBING, UNDERNEATH THE 3-COMP SINK.

③5 REPLACE ALL NON-COMMERCIAL APPLIANCES WITH COMMERCIAL GRADE, N.S.F. & HEALTH DEPT APPROVED ONES WHEN THEY FALL INTO DISREPAIR OR NO LONGER HOLD TEMP. (PANASONIC BLACK MICROWAVE, SS. G.E. TOASTER OVEN, CROCK POTS, HOUSEHOLD FREEZER.

Received By: X Richard [Signature] REHS: ANDREW [Signature]