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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| Page 1 | of. | (|

| 1 | of Facility/ D | BA: | | | 30) 934-0103 | Inspection Date: | | |
|--|--------------------------|---------------------------|--|--|---|---|-------------------|--|
| C | US Ph | at Mo | Kan | | | 3/1/13 | | |
| Addre | ess: | | | | | Reinspection/Date (on or a | ifter): 0 | |
| 86 | 59 NP | woul | le Rd Orland | CA 953 | 763 | (Reinspections are subject to fees) | ection | |
| Owne | er/Permitee: | | | Phone No.: | | Inspection Time: | Permit Exp. Date: | |
| CV | S/Lona | < Cal | litarvia 110 | 865-1 | +743 | 3:05 pm | | |
| Certif | fied Food Han | Her: | Garantee Control of the Control of t | | | Certificate Expiration Date | <u> </u> | |
| | Packea | | | | | Carrent | | |
| Service | | outine Insp | ection Reinspection Complain | at D Construc | tion/Pre-opening | (Certificate expires five years after it is issued) Other: | | |
| | | | TAIL FOOD CODE ("CalCode), Beginning with section | | | | nmary) | |
| | | | | | | | | |
| In | n = In complia | nce N/A | A = Not Applicable N/O = Not Observed | Maj = Major vio | | not in compliance COS = | Corrected On Site | |
| In | N/ |) 1 De | Critical Risk Factors for Disease monstration of knowledge | Maj Out CO | | ge present and performs dutie | Out | |
| In | | | ommunicable disease restrictions | 10 T | | 25. Personal cleanliness and hair restraints | | |
| In | N/ |) 3. Di | scharge of eyes, nose, mouth | | | 26. Approved thawing methods used | | |
| In | N/ | | ting, tasting, drinking, tobacco use | | | 27. Food separated and protected | | |
| In | N/ | | inds clean & properly washed, glove use | 57 | | 28. Washing fruits and vegetables | | |
| In | NI/A 27/ | | andwashing facilities available | | | ces properly identified, stored | and used | |
| In In | N/A N/ | | oper hot and cold food holding temps me as a public health control, records | \$0.44 \$9.4 | 30. Food storage, 33. Nonfood conta | 31. Self service, 32. Labeled | | |
| In | N/A N/ | | oper cooling methods | F-8-E-5 | | ict surfaces clean facilities maintained, test stri | ns | |
| In | N/A N/ | | oper cooking time and temps | 5.50 | | ensils, approved, clean good | | |
| In | N/A N/ |) 11. R | eheating temperature for hot holding | Mars | | ensils and linens, storage and | | |
| In | N/A N/ |) 12. R | eturned and reservice of food | | 37. Vending Mach | ines | | |
| In | | | ood in good condition, safe, unadulterated | 7 P. S. | | ilation and lighting | | |
| In | N/A N/ | 1, 200 to an analysis and | you continue barraces clean and builtized | | | provided and accurate | | |
| In | NI/A NI/ | | ood from approved source nell stock tags, 17. Gulf Oyster regs | | | properly used and stored | | |
| In In | N/A N/ N/A N/ | 10.51 | ompliance with HACCP plan | | | per backflow prevention rly disposed; facilities maint | nined | |
| In | N/A N/ | | dvisory for raw/undercooked food | 12.00 | | s supplied, properly construct | | |
| In | N/A | 1 | ealth care/ School prohibited food | | | and vermin proof; personal | | |
| In | | | ot & cold water. Temp: °F | | | . Floors, walls and ceilings maintained and clean | | |
| In | | | astewater properly disposed | | 46. No unapproved living or sleeping quarters | | | |
| In 23. No rodents, insects, birds, animals | | | | 47. Signs posted; Last inspection report available | | | | |
| No F | 0111C [] | | | | | | | |
| °F | Fo Fo | nd | Location | ok | Food | Locati | on | |
| - | 1 | | Zoomion | | 7 000 | Double | | |
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