

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

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

Name of Facility/ DBA: <i>Santos Muños</i>		Inspection Date: <i>7/15/16</i>	
Address: <i>7153 Highway 32, Orland, CA 95963</i>		Reinspection Date (on or after):  (Reinspections are subject to fees)	
Owner/Permittee: <i>Santos Muños</i>	Phone No.:	Inspection Time: <i>11:40 am</i>	Permit Exp. Date:
Certified Food Handler: <i>None - Farm Stand - whole produce + prepackaged</i>		Certificate Expiration Date: (Certificate expires five years after it is issued)	
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			
In		1. Demonstration of knowledge							24. Person in charge present and performs duties		
In		2. Communicable disease restrictions							25. Personal cleanliness and hair restraints		
In	N/O	3. Discharge of eyes, nose, mouth							26. Approved thawing methods used		
In	N/O	4. Eating, tasting, drinking, tobacco use							27. Food separated and protected		
In	N/O	5. Hands clean & properly washed, glove use							28. Washing fruits and vegetables		
In		6. Handwashing facilities available							29. Toxic substances properly identified, stored and used		
In	N/A	N/O	7. Proper hot and cold food holding temps						30. Food storage, 31. Self service, 32. Labeled		
In	N/A		8. Time as a public health control, records						33. Nonfood contact surfaces clean		
In	N/A	N/O	9. Proper cooling methods						34. Warewashing facilities maintained, test strips		
In	N/A	N/O	10. Proper cooking time and temps						35. Equipment, utensils, approved, clean good repair		
In	N/A	N/O	11. Reheating temperature for hot holding						36. Equipment, utensils and linens, storage and use		
In	N/A	N/O	12. Returned and reservice of food						37. Vending Machines		
In			13. Food safe and unadulterated						38. Adequate ventilation and lighting		
In	N/A	N/O	14. Food contact surfaces clean and sanitized						39. Thermometers provided and accurate		
In			15. Food from approved source						40. Wiping cloths properly used and stored		
In	N/A	N/O	16. Shell stock tags, 17. Gulf Oyster regs						41. Plumbing, proper backflow prevention		
In	N/A	N/O	18. Compliance with HACCP plan						42. Garbage properly disposed; facilities maintained		
In	N/A	N/O	19. Advisory for raw/undercooked food						43. Toilet facilities supplied, properly constructed, clean		
In	N/A		20. Health care/ School prohibited food						44. Premises clean, vermin proof; personal items separate		
In			21. Hot & cold water. Temp: _____ °F						45. Floors, walls and ceilings maintained and clean		
In			22. Wastewater properly disposed						46. No unapproved living or sleeping quarters		
In			23. No rodents, insects, birds, animals						47. Signs posted; Permit & inspection report available		
									48. Plan Review Required		

No PHF <input checked="" type="checkbox"/>					
°F	Food	Location	°F	Food	Location

Comments:

*No violations observed at time of inspection*

Received By: *Marta Muños*      REHS: *John H. Wells*