

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 2

Name of Facility/ DBA: DOUBLE EE MARKET		Inspection Date: 8/28/14	
Address: 575 SACRAMENTO ST., HAMILTON CITY, CA		Reinspection Date (on or after): NEXT INSPECTION <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: GURSWEK SINGH	Phone No.:	Inspection Time: 4:00	Permit Exp. Date:
Certified Food Handler: GURSWEK SINGH		Certificate Expiration Date: 9/2/15 <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 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
<input checked="" type="checkbox"/>	In		1. Demonstration of knowledge				24. Person in charge present and performs duties				
<input checked="" type="checkbox"/>	In		2. Communicable disease restrictions				25. Personal cleanliness and hair restraints				
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/O	3. Discharge of eyes, nose, mouth				26. Approved thawing methods used				
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/O	4. Eating, tasting, drinking, tobacco use				27. Food separated and protected				
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/O	5. Hands clean & properly washed, glove use				28. Washing fruits and vegetables				
<input type="checkbox"/>	In		6. Handwashing facilities available				29. Toxic substances properly identified, stored and used				
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	7. Proper hot and cold food holding temps				30. Food storage, 31. Self service, 32. Labeled				
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A	8. Time as a public health control, records				33. Nonfood contact surfaces clean				
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	9. Proper cooling methods				34. Warewashing facilities maintained, test strips				
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	10. Proper cooking time and temps				35. Equipment, utensils, approved, clean good repair			<input checked="" type="checkbox"/>	
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	11. Reheating temperature for hot holding				36. Equipment, utensils and linens, storage and use				
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	12. Returned and reservice of food				37. Vending Machines				
<input type="checkbox"/>	In		13. Food safe and unadulterated				38. Adequate ventilation and lighting				
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	14. Food contact surfaces clean and sanitized				39. Thermometers provided and accurate				
<input type="checkbox"/>	In		15. Food from approved source				40. Wiping cloths properly used and stored				
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	16. Shell stock tags, 17. Gulf Oyster regs				41. Plumbing, proper backflow prevention				
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	18. Compliance with HACCP plan				42. Garbage properly disposed; facilities maintained				
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	19. Advisory for raw/undercooked food				43. Toilet facilities supplied, properly constructed, clean				
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A	20. Health care/ School prohibited food				44. Premises clean, vermin proof, personal items separate			<input checked="" type="checkbox"/>	
<input type="checkbox"/>	In		21. Hot & cold water. Temp: 120 °F				45. Floors, walls and ceilings maintained and clean			<input checked="" type="checkbox"/>	
<input type="checkbox"/>	In		22. Wastewater properly disposed				46. No unapproved living or sleeping quarters				
<input type="checkbox"/>	In		23. No rodents, insects, birds, animals			<input checked="" type="checkbox"/>	47. Signs posted; Permit & inspection report available				
							48. Plan Review Required				

No PHF []					
°F	Food	Location	°F	Food	Location
159	CORN DOGS	MERCO WARMING CASE			
33	HAM & CHEESE SAND	SMALL QBD FRIDGE			
39	BOLOGNA	2-DOOR HABCO			
40	MILK	DISPLAY FRIDGE			

Comments:
- NO CRITICAL VIOLATIONS

VIOLATIONS:

- 23** KEEP FACILITY FREE OF ALL PESTS, VERMIN & INSECTS AT ALL TIMES. OBSERVED DRIED MOUSE DROPPINGS IN BACK STORAGE ROOM.
- 35** REPAIR HANDLE / DOOR ON THE WALK-IN FRIDGE.
- 44** REMOVE ALL OLD / UNUSED / BROKEN EQUIPMENT BEHIND THE MARKET.
- 44** KEEP ALL PERSONAL FOODS, ITEMS, ETC AWAY FROM & NOT IN WITH

Received By: **X Raj**

REHS: **ANDREW PEYCO**

OFFICIAL INSPECTION REPORT
Continuation Sheet
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Address:	
Owner/Permitee: <u>PAGE 2</u>	

Comments: VIOLATIONS (CONT.)

44 FOOD SERVED TO THE PUBLIC

45 REPAIR ALL THE HOLES IN THE WALLS AROUND THE ENTIRE FACILITY

45 REPAIR THE CEILING ABOVE WALK-IN IN THE BACK

Received By: <u>X Rui</u>	REHS: <u>Andrew Perry</u>
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