

**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: <u>Guero Stone</u>		Inspection Date: <u>8/7/14</u>	
Address: <u>1020 South St, Orland, CA 95963</u>		Reinspection Date (on or after): <u>Next Inspection</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>Sergio Duñas</u>	Phone No.: <u>865-8754</u>	Inspection Time: <u>12:40 pm</u>	Permit Exp. Date:
Certified Food Handler: <u>- Packaged Food -</u>		Certificate Expiration Date: <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 <u>CALIFORNIA RETAIL FOOD CODE ("CalCode"), Beginning with section 113700, California Health and Safety Code</u> (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			
<u>In</u>		1. Demonstration of knowledge					24. Person in charge present and performs duties			
<u>In</u>		2. Communicable disease restrictions					25. Personal cleanliness and hair restraints			
<u>In</u>	N/O	3. Discharge of eyes, nose, mouth					26. Approved thawing methods used			
<u>In</u>	N/O	4. Eating, tasting, drinking, tobacco use					27. Food separated and protected			
<u>In</u>	N/O	5. Hands clean & properly washed, glove use					28. Washing fruits and vegetables			
<u>In</u>		6. Handwashing facilities available			X		29. Toxic substances properly identified, stored and used	X		X
<u>In</u>	N/A	7. Proper hot and cold food holding temps					30. Food storage, 31. Self service, 32. Labeled			
<u>In</u>	N/A	8. Time as a public health control, records					33. Nonfood contact surfaces clean			
<u>In</u>	N/A	9. Proper cooling methods					34. Warewashing facilities maintained, test strips			
<u>In</u>	N/A	10. Proper cooking time and temps					35. Equipment, utensils, approved, clean good repair			
<u>In</u>	N/A	11. Reheating temperature for hot holding					36. Equipment, utensils and linens, storage and use			
<u>In</u>	N/A	12. Returned and reservice of food					37. Vending Machines			
<u>In</u>		13. Food safe and unadulterated					38. Adequate ventilation and lighting			
<u>In</u>	N/A	14. Food contact surfaces clean and sanitized					39. Thermometers provided and accurate			
<u>In</u>		15. Food from approved source					40. Wiping cloths properly used and stored			
<u>In</u>	N/A	16. Shell stock tags, 17. Gulf Oyster regs					41. Plumbing, proper backflow prevention			
<u>In</u>	N/A	18. Compliance with HACCP plan					42. Garbage properly disposed; facilities maintained			
<u>In</u>	N/A	19. Advisory for raw/undercooked food					43. Toilet facilities supplied, properly constructed, clean			
<u>In</u>	N/A	20. Health care/ School prohibited food					44. Premises clean, vermin proof; personal items separate			
<u>In</u>		21. Hot & cold water. Temp: <u>117</u> °F					45. Floors, walls and ceilings maintained and clean			
<u>In</u>		22. Wastewater properly disposed					46. No unapproved living or sleeping quarters			
<u>In</u>		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
	<u>All PHF's are Frozen.</u>				

Comments:  
Correct the following  
 1) Place towels in dispensers in men's room.  
 2) Store pesticides away from food (immediately corrected).

Received By: X Sergio Duñas REHS: John H. Wells