# 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: Round Table Pizza | | Inspection Date: 9/10/14 | |
| Address: 302 E. Walker St, Orland, CA 95963 | | Reinspection Date (on or after): 9/17/14 (Reinspections are subject to fees) | |
| Owner/Permitee: Frank Sisco | Phone No.: 865-4343 | Inspection Time: 4:15 pm | Permit Exp. Date: |
| Certified Food Handler: Alisha Brain & Heather Mendes | | Certificate Expiration Date: 6/16/15 & 3/31/16 (Certificate expires five years after it is issued) | |

Service: ☐ Routine Inspection ☒ Reinspection ☐ Complaint ☐ Construction/Pre-opening ☐ 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 |
|---|---|---|---|---|---|---|---|---|
| In | | N/O | 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 | N/O | 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 in good condition, safe, 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 and 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; Last inspection report available | |

No PHF [ ]

| °F | Food | Location | °F | Food | Location |
|---|---|---|---|---|---|
| 44 | Potato Salad | Salad Bar | 39 | Cucumber | 1-Door Cooler |
| 48 | Cottage Cheese | " " | | | |
| 47 | Macaroni Salad | " " | | | |
| 45 | Beans | " " | | | |

Comments: Recheck of violations from 9/2/14 found:

- Temps still above 45°F for some foods on salad bar.

Received By: [signature]

REHS: John H. Wells