

FOOD FACILITY INSPECTION REPORT
GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

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

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Name of Facility/ DBA: <u>Subway (Willows)</u>		Inspection Date: <u>7/25/18</u>	
Address: <u>505 Humboldt Ave, Willows, CA</u>		Reinspection Date (on or after): <u>NEXT INSPECTION</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permitee: <u>KLM INC</u>	Phone No.:	Inspection Time: <u>9:00</u>	Permit Exp. Date:
Certified Food Handler: <u>Brook BAUSKA</u>		Certificate Expiration Date: <u>1/17/20</u> <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			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>		<u>N/O</u>	3. Discharge of eyes, nose, mouth					26. Approved thawing methods used			
<u>In</u>		<u>N/O</u>	4. Eating, tasting, drinking, tobacco use					27. Food separated and protected			
<u>In</u>		<u>N/O</u>	5. Hands clean & properly washed, glove use					28. Washing fruits and vegetables			
<u>In</u>			6. Handwashing facilities available			<u>X</u>		29. Toxic substances properly identified, stored and used			
<u>In</u>	<u>N/A</u>	<u>N/O</u>	7. Proper hot and cold food holding temps					30. Food storage, 31. Self service, 32. Labeled			
<u>In</u>	<u>N/A</u>		8. Time as a public health control, records					33. Nonfood contact surfaces clean			
<u>In</u>	<u>N/A</u>	<u>N/O</u>	9. Proper cooling methods					34. Warewashing facilities maintained, test strips			
<u>In</u>	<u>N/A</u>	<u>N/O</u>	10. Proper cooking time and temps					35. Equipment, utensils, approved, clean good repair			
<u>In</u>	<u>N/A</u>	<u>N/O</u>	11. Reheating temperature for hot holding					36. Equipment, utensils and linens, storage and use			
<u>In</u>	<u>N/A</u>	<u>N/O</u>	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>	<u>N/A</u>	<u>N/O</u>	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>	<u>N/A</u>	<u>N/O</u>	16. Shell stock tags, 17. Gulf Oyster regs					41. Plumbing, proper backflow prevention		<u>X</u>	
<u>In</u>	<u>N/A</u>	<u>N/O</u>	18. Compliance with HACCP plan					42. Garbage properly disposed; facilities maintained			
<u>In</u>	<u>N/A</u>	<u>N/O</u>	19. Advisory for raw/undercooked food					43. Toilet facilities supplied, properly constructed, clean			
<u>In</u>	<u>N/A</u>		20. Health care/ School prohibited food					44. Premises clean, vermin proof; personal items separate			
<u>In</u>			21. Hot & cold water. Temp: <u>120</u> °F					45. Floors, walls and ceilings maintained and clean		<u>X</u>	
<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>40</u>	<u>ROAST BEEF</u>	<u>UNDER COUNTER FRIDGE</u>	<u>39</u>	<u>PASTRAMI</u>	<u>WALK-IN FRIDGE</u>
<u>40</u>	<u>HAM</u>	<u>SANDWICH LINE FRIDGE</u>			
<u>43</u>	<u>GUACAMOLE</u>	<u>SANDWICH LINE FRIDGE (DILIGENT PREP)</u>			
<u>39</u>	<u>MILK</u>	<u>TRUE FRIDGE</u>			

Comments:
-NO CRITICAL VIOLATIONS

OTHER VIOLATIONS

6 ALL HANDWASH SINKS SHALL BE PROPERLY SUPPLIED WITH HAND TOWELS, SOAP & WARM WATER (>100°F). THE FRONT HAND SINK LACKED PAPER TOWELS.

41 REPAIR LEAK ON PLUMBING UNDER 3-COMPARTMENT SINK.

45 REPAIR BROKEN SEAM ON THE FRP (WALL) ACROSS FROM THE WALK-IN FRIDGE.

Received By: Danielle Smith REHS: Andrew Perya