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: Pony Espresso	Inspection Date: 1/15/16
Address: 245 E. Walker St. Orland, CA 95963	Reinspection Date (on or after): Next Inspection (Reinspections are subject to fees)
Owner/Permitee: Scott & Amy Studybaker — Phone No.: 865-4387	Inspection Time: 12:20 pm — Permit Exp. Date:
Certified Food Handler: Amy Studybaker	Certificate Expiration Date: 6/24/16 (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	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		X		30. Food storage, 31. Self service, 32. Labeled		
In N/A	8. Time as a public health control, records		~~X~~		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	X	
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	X	
In	21. Hot & cold water. Temp: 124 °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 [ ]

°F	Food	Location	°F	Food	Location
40	Milk	Left undercounter cooler			
41	Milk	Right undercounter cooler			
43	Breakfast Burrito	1-Door True upright cooler			

Comments:
Correct the following:
7) Cold hold potentially hazardous foods at/below 41°F. Measured breakfast burrito at 43°F in True upright cooler.
11) Repair hot water handle at 3-compartment sink. It leaks when turned on.
14) Maintain back door & service windows closed when not in use.

Received By: X David Coria

REHS: John H. Wells