

FOOD FACILITY INSPECTION REPORT
GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

225 N. Tehama Street, Willows, CA 95988
 Phone (530) 934-6102 FAX (530) 934-6103

Name of Facility/ DBA: <u>Bill & Emily Donuts</u>		Inspection Date: <u>3/5/24</u>	
Address: <u>55 E. WALKER ST., ORLAND</u>		Reinspection Date (on or after): <u>NEXT INSPECTION</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>KAO LIM</u>	Phone No.: <u>865-4324</u>	Inspection Time: <u>9:00</u>	Permit Exp. Date:
Certified Food Handler: <u>MGR</u> <u>KELLY LEANG</u>		Certificate Expiration Date: <u>6/29/26</u> <small>(Certificate expires five years after it is issued)</small>	
Service: <input 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 (See reverse side of sheet for summary)</u>			

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									
In																				
In											X			24. Person in charge present and performs duties						
In														25. Personal cleanliness and hair restraints						
In		N/O												26. Approved thawing methods used						
In		N/O												27. Food separated and protected			X			
In		N/O												28. Washing fruits and vegetables						
In														29. Toxic substances properly identified, stored and used						
In	N/A	N/O												30. Food storage, 31. Self service, 32. Labeled			X			
In	N/A													33. Nonfood contact surfaces clean						
In	N/A	N/O												34. Warewashing facilities maintained, test strips						
In	N/A	N/O												35. Equipment, utensils, approved, clean good repair			X			
In	N/A	N/O												36. Equipment, utensils and linens, storage and use						
In	N/A	N/O												37. Vending Machines						
In														38. Adequate ventilation and lighting						
In	N/A	N/O												39. Thermometers provided and accurate						
In														40. Wiping cloths properly used and stored						
In	N/A	N/O												41. Plumbing, proper backflow prevention						
In	N/A	N/O												42. Garbage properly disposed; facilities maintained						
In	N/A	N/O												43. Toilet facilities supplied, properly constructed, clean						
In	N/A													44. Premises clean, vermin proof; personal items separate						
In														45. Floors, walls and ceilings maintained and clean			X			
In														46. No unapproved living or sleeping quarters						
In														47. Signs posted; Permit & inspection report available						
														48. Plan Review Required						

No PHF []					
°F	Food	Location	°F	Food	Location
32	HAM	SINGLE DOOR TRUE FRIDGE			
32	CHOCOLATE MILK	REACH-IN TRUE FRIDGE			

Comments: CORRECT THE FOLLOWING

① ALL EMPLOYEES THAT DON'T OTHERWISE HAVE THE FOOD SAFETY MGR. CERT MUST OBTAIN A FOOD SAFETY HANDLER CARD.

② STORE ALL TOOLS IN A DESIGNATED AREA THAT IS AWAY FROM FOOD PREP SURFACES & AREAS. 2 OBSERVED GARAGE TOOLS ON FOOD PREP TABLE.

Received By: [Signature] REHS: ANDREW A. PERYO →

OFFICIAL INSPECTION REPORT

Continuation Sheet

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Comments: CORRECT THE FOLLOWING:

(32) LABEL ALL SPICES NOT IN THEIR ORIGINAL CONTAINER.

(35) DISCONTINUE USING CUPS AS BULK BINS SCOPERS. USE ONLY SCOOPS THAT HAVE HANDLES ARE NON-ABSORBENT & EASILY CLEANABLE.

(25) REPLACE ALL NON-COMMERCIAL APPLIANCES WITH COMMERCIAL GRADE N.S.F. APPROVED MODELS. (WHITE MICROWAVE)

(45) REPAIR THE WALLS WHERE BAGS OF GLAZE ARE STORED. INSTALL F.R.P OR STAINLESS STEEL AND REPAIR DRY WALL.

NOTE: MAKE SURE YOU ARE USING THE MOP SINK TO REFILL & DUMP MOP BUCKET. THE 3-COMP SINK MUST NOT BE USED FOR THIS PURPOSE.

Received By: <u>[Signature]</u>	REHS: <u>Andrew Peryo</u>
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