FOOD FACILITY INSPECTION REPORT GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

247 North Villa Avenue, Willows, CA 95988

Page 1 of

Phone (530) 934-6102 FAX (530) 934-6103							
Name of Facility/ DBA: Inspection Date:							
Address:						10/11/19	
1002 SixthSt Orland (A 35963)						Reinspection Dafe (on or after): (Reinspections are subject to fees)	
Owner/Permitee: Phone No.:							Inspection Time: Permit Exp. Date:
11/1 to talvan 865-400							11 or am
Certified Food Handler: Certificate Expiration Date: Certificate Expiration Date:							
						pu	(Certificate expires five years after it is issued)
Service: Routine Inspection							
In = In complia		N/A = Not Applicable $N/O = Not Obsection Obsection N/O = Not Obsection O$	Mai	Maj = N	Major vid	olation Out = Item	s not in compliance COS = Corrected On Site Out COS
In	Demonstration of knowledge		Triag	Jour	003	24. Person in charge present and performs duties	
In N/O	Communicable disease restrictions Discharge of eyes, nose, mouth					25. Personal cleanliness and hair restraints 26. Approved thawing methods used	
In N/O				26. Approved thaw 27. Food separated	and protected		
In N/O	5. Hai	. Hands clean & properly washed, glove use 28. Washing f		28. Washing fruits	and vegetables		
In N/A N/O	Handwashing facilities available Proper hot and cold food holding temps					29. Toxic substances properly identified, stored and used	
In N/A	8. Time as a public health control, records			X	X	30. Food storage, 31. Self service, 32. Labeled 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	The state of the s					35. Equipment, utensils, approved, clean good repair	
In N/A N/O	A N/O 12. Returned and reservice of food					36. Equipment, utensils and linens, storage and use 37. Vending Machines	
In	13. Food safe and unadulterated					38. Adequate ventilation and lighting	
In N/A N/O	N/O 14. Food contact surfaces clean and sanitized		X	3.00		39. Thermometers provided and accurate	
In N/A N/O	15. Food from approved source 16. Shell stock tags, 17. Gulf Oyster regs			-		40. Wiping cloths properly used and stored 41. Plumbing, proper backflow prevention	
In N/A N/O	N/A N/O 18. Compliance with HACCP plan					42. Garbage properl	y disposed; facilities maintained
	N/A N/O 19. Advisory for raw/undercooked food					43. Toilet facilities supplied, properly constructed, clean	
In N/A	N/A 20. Health care/ School prohibited food 21. Hot & cold water. Temp: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					44. Premises clean, vermin proof; personal items separate 45. Floors, walls and ceilings maintained and clean	
In	22. Wastewater properly disposed					46. No unapproved l	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
ST Posale		Soup Well		40	18	Zaas	Cooks' Prep Looles
30 Rice		steam Table		41	Ch	50 BC	Cooling in Walkern
135 Bems	>		3.1 ····································			3	1700
38 Uniles	8 Chilen "						
Comments: Violation							
Orde 50 ppm of chlarine during dishwastrer sanitize							
Detter Violetian							
Hold potentially hazardous foods atlabove 135° For at/below							
41° F. Measured Mile at 130° F on steam table-worked							
30 minutes parties, allowed reheat.							
Received By Mells REHS: John H. Wells							
	1-10	/ / /					