

COTTAGE FOOD OPERATION – OFFICIAL INSPECTION REPORT
GLENN COUNTY ENVIRONMENTAL HEALTH

257 North Villa Avenue, Willows, CA 95988
 Phone: (530) 934-6102 • Fax: (530) 934-6103

Name of Cottage Food Operation/DBA: Stones Space Food		Inspection Date: 10/17/23	
Address: 321 Byron Way		Reinspection Date (on or after): (Reinspections are subject to fees)	
Owner/Permittee: Julie Long & Mike Stone	Phone Number: 530 723-0762	Inspection Time In: 3:00 PM	Inspection Time Out: 4:00 PM
Operation Type: <input type="checkbox"/> Class A – Direct Sales Only <input checked="" type="checkbox"/> Class B – Direct or Indirect Sales	Service: <input type="checkbox"/> Routine Inspection <input type="checkbox"/> Reinspection <input type="checkbox"/> Complaint <input checked="" type="checkbox"/> Initial/Pre-Opening	Permit/Registration #	Expiration Date: 10/20/24

Demonstration of Knowledge	Out	Facility Requirements	Out
1. Self-certification checklist submitted (class A)	<input type="checkbox"/> In N/A N/O	15. Adequate storage for food and related equipment	<input type="checkbox"/> In N/A N/O
2. Food processor course completed	<input checked="" type="checkbox"/> In N/A N/O	16. Food preparation occurs in kitchen of CFO	<input checked="" type="checkbox"/> In N/A N/O
Employee Health and Hygiene Practices	Out	17. CFO located in private dwelling/operator residence	<input checked="" type="checkbox"/> In N/A N/O
3. No ill employees or workers	<input checked="" type="checkbox"/> In N/A N/O	Labeling	Out
4. No smoking in CFO	<input checked="" type="checkbox"/> In N/A N/O	18. "Made in Home Kitchen" on package	<input type="checkbox"/> In N/A N/O
5. Employees shall not contaminate food	<input checked="" type="checkbox"/> In N/A N/O	19. Common name of product on package	<input checked="" type="checkbox"/> In N/A N/O
Prevent Contamination by Hands	Out	20. Name of CFO on package	<input checked="" type="checkbox"/> In N/A N/O
6. Hand washing station stocked and available	<input checked="" type="checkbox"/> In N/A N/O	21. Ingredients list on package	<input checked="" type="checkbox"/> In N/A N/O
7. Hands washed prior to food preparation	<input checked="" type="checkbox"/> In N/A N/O	22. Registration or permit number of package	<input type="checkbox"/> In N/A N/O
8. Proper glove use	<input checked="" type="checkbox"/> In N/A N/O	Vermin	Out
Approved Food Items	Out	23. No rodents, insects, or animals in CFO	<input checked="" type="checkbox"/> In N/A N/O
9. Food prepared from approved food list only water	<input type="checkbox"/> In N/A N/O	Compliance and Enforcement	Out
10. Potable Water Source	<input checked="" type="checkbox"/> In N/A N/O	24. CFO operating with valid permit/registration	<input checked="" type="checkbox"/> In N/A N/O
Protection from Contamination	Out	25. Approved direct sales to customers	<input checked="" type="checkbox"/> In N/A N/O
11. Food free from contamination and adulteration	<input checked="" type="checkbox"/> In N/A N/O	26. Approved indirect sales to customers	<input checked="" type="checkbox"/> In N/A N/O
12. Kitchen equipment and utensils clean and in good repair	<input checked="" type="checkbox"/> In N/A N/O	27. Approved number of employees	<input checked="" type="checkbox"/> In N/A N/O
13. Food contact surfaces cleaned and sanitized	<input checked="" type="checkbox"/> In N/A N/O	28. Meets gross sales requirements	<input checked="" type="checkbox"/> In N/A N/O
14. No infants, small children, or pets in kitchen during CFO hours	<input checked="" type="checkbox"/> In N/A N/O	Other	Out
		29.	<input type="checkbox"/> In N/A N/O

Out = Out of compliance In = In Compliance N/A = Not Applicable N/O = Not Observed

Comments:

Food facility ~~is~~ grant shall be able to operate pending approval from all other public agencies.

If menu changes occur notify Glenn Co. Environmental health.

Received By:

Julie Long

REHS:

Jy Bhakta