

FOOD FACILITY INSPECTION REPORT
GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

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

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Name of Facility/ DBA: <u>Crazy Taco</u>		Inspection Date: <u>10/28/22</u>	
Address: <u>201 S. TEHAMA ST., WILLOWS, CA</u>		Reinspection Date (on or after): <u>NEXT INSPECTION</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>FRANCISCO ZEPEDA-RENTARIA</u>	Phone No.:	Inspection Time: <u>2:00</u>	Permit Exp. Date:
Certified Food Handler: MGR. <u>FRANCISCO ZEPEDA</u>		Certificate Expiration Date: <u>10/23/25</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			
<u>In</u>									24. Person in charge present and performs duties		
<u>In</u>									25. Personal cleanliness and hair restraints		
<u>In</u>	N/O								26. Approved thawing methods used		
<u>In</u>	N/O								27. Food separated and protected		
<u>In</u>	N/O								28. Washing fruits and vegetables		
<u>In</u>									29. Toxic substances properly identified, stored and used		
<u>In</u>	N/A	N/O							30. Food storage, 31. Self service, 32. Labeled		
<u>In</u>	N/A								33. Nonfood contact surfaces clean		
<u>In</u>	N/A	N/O							34. Warewashing facilities maintained, test strips		
<u>In</u>	N/A	N/O							35. Equipment, utensils, approved, clean good repair		
<u>In</u>	N/A	N/O							36. Equipment, utensils and linens, storage and use		
<u>In</u>	N/A	N/O							37. Vending Machines		
<u>In</u>	N/A	N/O							38. Adequate ventilation and lighting		X
<u>In</u>	N/A	N/O							39. Thermometers provided and accurate		
<u>In</u>	N/A	N/O							40. Wiping cloths properly used and stored		X
<u>In</u>	N/A	N/O							41. Plumbing, proper backflow prevention		
<u>In</u>	N/A	N/O							42. Garbage properly disposed; facilities maintained		
<u>In</u>	N/A	N/O							43. Toilet facilities supplied, properly constructed, clean		
<u>In</u>	N/A	N/O							44. Premises clean, vermin proof; personal items separate		
<u>In</u>							X		45. Floors, walls and ceilings maintained and clean		
<u>In</u>									46. No unapproved living or sleeping quarters		
<u>In</u>									47. Signs posted; Permit & inspection report available		
<u>In</u>									48. Plan Review Required		

No PHF []					
°F	Food	Location	°F	Food	Location
36	BEEF	UNDER PREP COOLER			
155	BEANS	ATOP STEAM TABLE			

Comments: CORRECT THE FOLLOWING!

(21) MAINTAIN HOT WATER OF AT LEAST 120°F AT THE 2-COMPARTMENT SINK AT ALL TIMES. THE HOT WATER SYSTEM SHALL PROVIDE CONTINUOUS HOT WATER OF 120°F. REPEAT!

(38) THE EXHAUST ^{HOOD} SHALL BE IN OPERATION WHEN THE GRILL IS IN OPERATION

(40) MAINTAIN PROPER SANITIZER IN PAG BUCKET AT ALL TIMES. IT MEASURED NON-DETECT.

Received By: [Signature] REHS: ANDREW TAYLO