

# FOOD FACILITY INSPECTION REPORT

## GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

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

Page 1 of 1

Name of Facility/ DBA: <b>Willows High School</b>		Inspection Date: <b>11/17/21</b>	
Address: <b>203 N. MURDOCK ST., WILLOWS</b>		Reinspection Date (on or after): <b>NEXT INSPECTION</b> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <b>Willows Unified School Dist</b>	Phone No.:	Inspection Time: <b>10:30</b>	Permit Exp. Date:
Certified Food Handler: <b>CRISTINA O CAMPO</b>		Certificate Expiration Date: <b>9/17/24</b> <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 <b>CALIFORNIA RETAIL FOOD CODE</b> ("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							
In										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					
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					
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					
In	N/A	N/O								36. Equipment, utensils and linens, storage and use			X		
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	N/O								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					
In										48. Plan Review Required			X		

No PHF [ ]					
°F	Food	Location	°F	Food	Location
34	EGG NOX	2-DOOR TRUE FRIDGE			
135	QUESADILLAS	METRO WARMING CABINET			
30	HAN	2-DOOR TRUE FRIDGE			
38	MILK	WALK-IN FRIDGE			

Comments:  
**=NO CRITICAL VIOLATIONS**  
**\*FACILITY IS CLEAN & WELL MAINTAINED.**  
CORRECT THE FOLLOWING:  
**(36) REMOVE ALL BROKEN OR UNUSED EQUIPMENT & APPLIANCES.**  
**(45) REPAIR/REPLACE THE TILE + GROUT AROUND WALK-IN DOOR.**  
**(48) ALL NEW APPLIANCES, CHANGES OR REMODELS INSIDE A FOOD FACILITY MUST BE PLAN CHECKED AND APPROVED BY GLENN CO. ENVIRONMENTAL HEALTH. A FACILITY CONSTRUCTED A WALK-IN + WARMERS. APPLY FOR A PLAN CHECK! REPEAT VIOLATION!**

Received By: *Cristina Ocampo* REHS: *Andrew Deryo*