

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: MURDOCK ELEMENTARY SCHOOL		Inspection Date: 11/18/21	
Address: 655 W. FRENCH STREET, WILLOWS		Reinspection Date (on or after): NEXT INSPECTION <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: WILLOWS UNIFIED SCHOOL DIST	Phone No.:	Inspection Time: 10:30	Permit Exp. Date:
Certified Food Handler: NORA PEREZ		Certificate Expiration Date: 9/17/21 <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 CALIFORNIA RETAIL FOOD CODE ("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		Out	COS				
<input checked="" type="checkbox"/> In	1. Demonstration of knowledge										
<input checked="" type="checkbox"/> In	2. Communicable disease restrictions										
<input checked="" type="checkbox"/> In	N/O 3. Discharge of eyes, nose, mouth										
<input checked="" type="checkbox"/> In	N/O 4. Eating, tasting, drinking, tobacco use										
<input checked="" type="checkbox"/> In	N/O 5. Hands clean & properly washed, glove use										
<input checked="" type="checkbox"/> In	6. Handwashing facilities available										
<input checked="" type="checkbox"/> In	N/A N/O 7. Proper hot and cold food holding temps										
<input checked="" type="checkbox"/> In	N/A 8. Time as a public health control, records										
<input checked="" type="checkbox"/> In	N/A N/O 9. Proper cooling methods										
<input checked="" type="checkbox"/> In	N/A N/O 10. Proper cooking time and temps										
<input checked="" type="checkbox"/> In	N/A N/O 11. Reheating temperature for hot holding										
<input checked="" type="checkbox"/> In	N/A N/O 12. Returned and reservice of food										
<input checked="" type="checkbox"/> In	13. Food safe and unadulterated										
<input checked="" type="checkbox"/> In	N/A N/O 14. Food contact surfaces clean and sanitized										
<input checked="" type="checkbox"/> In	15. Food from approved source										
<input checked="" type="checkbox"/> In	N/A N/O 16. Shell stock tags, 17. Gulf Oyster regs										
<input checked="" type="checkbox"/> In	N/A N/O 18. Compliance with HACCP plan										
<input checked="" type="checkbox"/> In	N/A N/O 19. Advisory for raw/undercooked food										
<input checked="" type="checkbox"/> In	N/A 20. Health care/ School prohibited food										
<input checked="" type="checkbox"/> In	21. Hot & cold water. Temp: 120⁺ °F										
<input checked="" type="checkbox"/> In	22. Wastewater properly disposed										
<input checked="" type="checkbox"/> In	23. No rodents, insects, birds, animals										
	24. Person in charge present and performs duties										
	25. Personal cleanliness and hair restraints										
	26. Approved thawing methods used										
	27. Food separated and protected										
	28. Washing fruits and vegetables										
	29. Toxic substances properly identified, stored and used										
	30. Food storage, 31. Self service, 32. Labeled										
	33. Nonfood contact surfaces clean										
	34. Warewashing facilities maintained, test strips										
	35. Equipment, utensils, approved, clean good repair									X	
	36. Equipment, utensils and linens, storage and use										
	37. Vending Machines										
	38. Adequate ventilation and lighting										
	39. Thermometers provided and accurate										
	40. Wiping cloths properly used and stored										
	41. Plumbing, proper backflow prevention										
	42. Garbage properly disposed; facilities maintained										
	43. Toilet facilities supplied, properly constructed, clean										
	44. Premises clean, vermin proof; personal items separate										
	45. Floors, walls and ceilings maintained and clean										
	46. No unapproved living or sleeping quarters										
	47. Signs posted; Permit & inspection report available										
	48. Plan Review Required										

No PHF []					
°F	Food	Location	°F	Food	Location
35	MILK	MILK COOLER TRUE FRIDGE			
40	RANCH	2 - DOOR TRUE FRIDGE			
40	HOT DOGS	2 - DOOR FRIDGE			
39	RAW SHELL EGG	2 - DOOR FRIDGE			

Comments:
 - NO CRITICAL VIOLATIONS
 * FACILITY IS CLEAN & WELL MAINTAINED.
 CORRECT THE FOLLOWING:
 (35) REPAIR OR REPLACE THE LEAKY FIXTURES AT THE 3-COMPARTMENT SINK.

Received By: Nora Ayzen	REHS: ANDREW PEREZ
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