

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: <i>Little Caesar's</i>		Inspection Date: <i>3/3/22</i>	
Address: <i>701 Walker St, Orland, CA 95963</i>		Reinspection Date (on or after): <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <i>AB Brothers, Inc.</i>	Phone No.: <i>855-4000</i>	Inspection Time: <i>4:15 pm</i>	Permit Exp. Date:
Certified Food Handler: <i>Bhupinder Singh</i>		Certificate Expiration Date: <i>1/25/25</i> <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		
<input checked="" type="checkbox"/>			1. Demonstration of knowledge				24. Person in charge present and performs duties	Out	COS
<input checked="" type="checkbox"/>			2. Communicable disease restrictions				25. Personal cleanliness and hair restraints		
<input checked="" type="checkbox"/>	N/O		3. Discharge of eyes, nose, mouth				26. Approved thawing methods used		
<input checked="" type="checkbox"/>	N/O		4. Eating, tasting, drinking, tobacco use				27. Food separated and protected		
<input checked="" type="checkbox"/>	N/O		5. Hands clean & properly washed, glove use				28. Washing fruits and vegetables		
<input checked="" type="checkbox"/>			6. Handwashing facilities available				29. Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/>	N/A	N/O	7. Proper hot and cold food holding temps				30. Food storage, 31. Self service, 32. Labeled		
<input checked="" type="checkbox"/>	N/A		8. Time as a public health control, records				33. Nonfood contact surfaces clean		
<input checked="" type="checkbox"/>	N/A	N/O	9. Proper cooling methods				34. Warewashing facilities maintained, test strips		
<input checked="" type="checkbox"/>	N/A	N/O	10. Proper cooking time and temps				35. Equipment, utensils, approved, clean good repair		
<input checked="" type="checkbox"/>	N/A	N/O	11. Reheating temperature for hot holding				36. Equipment, utensils and linens, storage and use		
<input checked="" type="checkbox"/>	N/A	N/O	12. Returned and reservice of food				37. Vending Machines		
<input checked="" type="checkbox"/>			13. Food safe and unadulterated				38. Adequate ventilation and lighting		
<input checked="" type="checkbox"/>	N/A	N/O	14. Food contact surfaces clean and sanitized				39. Thermometers provided and accurate		
<input checked="" type="checkbox"/>			15. Food from approved source				40. Wiping cloths properly used and stored		
<input checked="" type="checkbox"/>	N/A	N/O	16. Shell stock tags, 17. Gulf Oyster regs				41. Plumbing, proper backflow prevention		
<input checked="" type="checkbox"/>	N/A	N/O	18. Compliance with HACCP plan				42. Garbage properly disposed; facilities maintained		
<input checked="" type="checkbox"/>	N/A	N/O	19. Advisory for raw/undercooked food				43. Toilet facilities supplied, properly constructed, clean		
<input checked="" type="checkbox"/>	N/A	N/O	20. Health care/ School prohibited food				44. Premises clean, vermin proof; personal items separate		
<input checked="" type="checkbox"/>			21. Hot & cold water. Temp: <i>120</i> °F				45. Floors, walls and ceilings maintained and clean		
<input checked="" type="checkbox"/>			22. Wastewater properly disposed				46. No unapproved living or sleeping quarters		
<input checked="" type="checkbox"/>			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
<i>135</i>	<i>Chicken WINGS</i>	<i>Front stall warmer</i>	<i>40</i>	<i>Pepperoni</i>	<i>Walk-in cooler</i>
<i>135</i>	<i>PIZZA</i>	<i>" "</i>	<i>40</i>	<i>Diced Ham</i>	<i>Pizza Prep cooler</i>

Comments:
No violations observed.

Received By: *Ethel Banillas* REHS: *John H. Wells*