

FOOD FACILITY INSPECTION REPORT
GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

ENVIRONMENTAL@countyofglenn.ca.gov

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

Name of Facility/ DBA: <u>Dutco Bros</u>		Inspection Date: <u>4/14/23</u>
Address: <u>902 NEWVILLE RD., ORLAND, CA 95963</u>		Reinspection Date (on or after): <u>NEXT INSPECTION</u> <small>(Reinspections are subject to fees)</small>
Owner/Permittee: <u>Matt Long</u>	Phone No.:	Inspection Time: <u>3:00</u>
Certified Food Handler: <u>- NONE CURRENT</u>		Permit Exp. Date:
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	Out	COS
In		1. Demonstration of knowledge				X			24. Person in charge present and performs duties
In		2. Communicable disease restrictions							25. Personal cleanliness and hair restraints
In	N/O	3. Discharge of eyes, nose, mouth							26. Approved thawing methods used
In	N/O	4. Eating, tasting, drinking, tobacco use							27. Food separated and protected
In	N/O	5. Hands clean & properly washed, glove use							28. Washing fruits and vegetables
In		6. Handwashing facilities available				X			29. Toxic substances properly identified, stored and used
In	N/A	7. Proper hot and cold food holding temps				X			30. Food storage, 31. Self service, 32. Labeled
In	N/A	8. Time as a public health control, records							33. Nonfood contact surfaces clean
In	N/A	9. Proper cooling methods							34. Warewashing facilities maintained, test strips
In	N/A	10. Proper cooking time and temps							35. Equipment, utensils, approved, clean good repair
In	N/A	11. Reheating temperature for hot holding							36. Equipment, utensils and linens, storage and use
In	N/A	12. Returned and reservice of food							37. Vending Machines
In		13. Food safe and unadulterated							38. Adequate ventilation and lighting
In	N/A	14. Food contact surfaces clean and sanitized							39. Thermometers provided and accurate
In		15. Food from approved source						X	40. Wiping cloths properly used and stored
In	N/A	16. Shell stock tags, 17. Gulf Oyster regs							41. Plumbing, proper backflow prevention
In	N/A	18. Compliance with HACCP plan							42. Garbage properly disposed; facilities maintained
In	N/A	19. Advisory for raw/undercooked food							43. Toilet facilities supplied, properly constructed, clean
In	N/A	20. Health care/ School prohibited food							44. Premises clean, vermin proof; personal items separate
In		21. Hot & cold water. Temp: <u>120+°F</u>							45. Floors, walls and ceilings maintained and clean
In		22. Wastewater properly disposed							46. No unapproved living or sleeping quarters
In		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
40	Milk	WALK-IN FRIDGES			
46	KECK MIX	ON TOP OF COUNTER			

Comments: VIOLATIONS:

(1) OBTAIN THE MANAGER FOOD SAFETY CERT WITHIN 60 DAYS. HANDLER CERTS WERE CURRENT. COMPLIANCE DATE => 6/14/23.

(6) DO NOT BLOCK THE HANDWASH SINK W/ ANYTHING, INCLUDING THE LADDER. OBSERVED LADDER + BOX IN FRONT OF SINK

(7) HOLD ALL POTENTIALLY HAZARDOUS FOOD AT BELOW 41°F OR

Received By: [Signature] REHS: Andrew [Signature]

OFFICIAL INSPECTION REPORT

Continuation Sheet

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Name of Facility / DBA: <u>Dutch Bros</u>	Inspection Date: <u>4/14/23</u>
Address: <u>PAGE 2</u>	
Owner/Permitee: <u>PAGE 2</u>	

Comments: VIOLATIONS (CONT.)

(7) AT/ABOVE 135°F AT ALL TIMES. MEASURED KICK ME MIX AT 46°F ON TOP OF COUNTER. WHEN NOT BEING USED TO MAKE A DRINK IT NEEDS TO BE PLACED BACK IN REFRIGERATION.

(40) MAINTAIN THE PROPER AMOUNT OF SANITIZER IN THE WIPING RAG BUCKETS AT ALL TIMES. THE ONLY BUCKET MEASURED < 100 PPM FOR QUATS. (> 200 PPM REQ'D).

Received By: <u>[Signature]</u>	REHS: <u>Andrew A. [Signature]</u>
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