

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: <u>La Hacienda Lince</u>		Inspection Date: <u>4/28/22</u>	
Address: <u>725-27 4th St, Orland, CA 95963</u>		Reinspection Date (on or after): <u>5/5/22</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>Mauvo Lince</u>	Phone No.:	Inspection Time: <u>3:00 pm</u>	Permit Exp. Date:
Certified Food Handler: <u>- None Current -</u>		Certificate Expiration Date: <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									
In									X				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										X			29. Toxic substances properly identified, stored and used							
In	N/A	N/O											30. Food storage, 31. Self service, 32. Labeled		X					
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							
In	N/A	N/O											37. Vending Machines							
In									X		X		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		X					
In	N/A												44. Premises clean, vermin proof; personal items separate							
In										X			45. Floors, walls and ceilings maintained and clean		X					
In										X			46. No unapproved living or sleeping quarters							
In										X			47. Signs posted; Permit & inspection report available							
In													48. Plan Review Required							

No PHF []					
°F	Food	Location	°F	Food	Location
	34 Eggs	Prep cooler			
	35 Beans	2-Door cooler in dry storage room.			

Comments:
Critical Violations
 Provide a food safety manager for facility. Maintain food safety certifications available for review.
 Cease allowing insect infestation of food. Observed 50+ small insects in bin with cake mix, sugar, etc. Discarded 10 lbs of cake mix & 10 lbs of sugar. Prevent insect entry into facility.

Received By: <u>[Signature]</u>	REHS: <u>John H. Wells</u>
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OFFICIAL INSPECTION REPORT

Continuation Sheet

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Address: <i>725-27 4th St, Orland</i>	
Owner/Permitee: <i>Mauro Lince</i>	

Comments:
Other violations

- 6) Provide towels at men's restroom sink.*
- 21) Provide hot water of 120°F. Measured 112°F.*
- 30) Store all food (fruit filling buckets) six inches off of floor.*
- 43) Provide self-closing devices on restroom doors.*
- 45) Eliminate 1" gap beneath dry storage room door to outside.*

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