

FOOD FACILITY INSPECTION REPORT

GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

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

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Name of Facility/ DBA: <u>HAMILTON Union High School</u>		Inspection Date: <u>5/25/22</u>	
Address: <u>Highway 32 & 45, Hamilton City, CA</u>		Reinspection Date (on or after): <u>BE NEXT INSPECTION</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>HAMILTON Union High School</u>	Phone No.:	Inspection Time: <u>11:30</u>	Permit Exp. Date:
Certified Food Handler: <u>MARIE RIVERA</u>		Certificate Expiration Date: <u>7/23/24</u> <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 <i>CALIFORNIA RETAIL FOOD CODE</i> ("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					24. Person in charge present and performs duties		
<input checked="" type="checkbox"/> In					25. Personal cleanliness and hair restraints		
<input checked="" type="checkbox"/> In	N/O				26. Approved thawing methods used		
<input checked="" type="checkbox"/> In	N/O				27. Food separated and protected		
<input checked="" type="checkbox"/> In	N/O				28. Washing fruits and vegetables		
<input checked="" type="checkbox"/> In					29. Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/> In	N/A	N/O			30. Food storage, 31. Self service, 32. Labeled		
<input checked="" type="checkbox"/> In	N/A				33. Nonfood contact surfaces clean		
<input checked="" type="checkbox"/> In	N/A	N/O			34. Warewashing facilities maintained, test strips		
<input checked="" type="checkbox"/> In	N/A	N/O			35. Equipment, utensils, approved, clean good repair		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> In	N/A	N/O			36. Equipment, utensils and linens, storage and use		
<input checked="" type="checkbox"/> In	N/A	<u>N/O</u>			37. Vending Machines		
<input checked="" type="checkbox"/> In					38. Adequate ventilation and lighting		
<input checked="" type="checkbox"/> In	N/A	N/O			39. Thermometers provided and accurate		
<input checked="" type="checkbox"/> In					40. Wiping cloths properly used and stored		
<input checked="" type="checkbox"/> In	<u>N/A</u>	N/O			41. Plumbing, proper backflow prevention		
<input checked="" type="checkbox"/> In	<u>N/A</u>	N/O			42. Garbage properly disposed; facilities maintained		
<input checked="" type="checkbox"/> In	<u>N/A</u>	N/O			43. Toilet facilities supplied, properly constructed, clean		
<input checked="" type="checkbox"/> In	N/A				44. Premises clean, vermin proof; personal items separate		
<input checked="" type="checkbox"/> In					45. Floors, walls and ceilings maintained and clean		
<input checked="" type="checkbox"/> In					46. No unapproved living or sleeping quarters		
<input checked="" type="checkbox"/> In					47. Signs posted; Permit & inspection report available		
<input checked="" type="checkbox"/> In					48. Plan Review Required		

No PHF []					
°F	Food	Location	°F	Food	Location
137	CHEESE PIZZA	WARMING CABINET			
29	MILK	OUTSIDE WALK-IN FRIDGE			
31	RANCH	3-DOOR TRUE FRIDGE			

Comments: VIOLATIONS
(35) REPAIR THE SEALS ON THE 3-DOOR TRUE FRIDGE IN THE KITCHEN.

Received By: <u>X Marci Rios</u>	REHS: <u>Andrew Perryo</u>
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