FOOD FACILITY INSPECTION REPORT GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

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

Page 1 of ______

Name of Facility/ DBA: Hearto 6N 4Tff Street										
HECHO ON YITH STREET						7/7/23				
Address:				a. A-013			Reinspection Date (on or after):			
824 tourth St., ORIANT), CA 95763			NEXT INSPECTION (Reinspections are subject to Rees)			
Owner/Permitee:			F	Phone No.: Inspection			Inspection Time:	Permit Ex	p. Date:	
Certified Food Handler: MGR.				Certificate Expiration Date:			:			
	-1-1	(Certificate expires/five years after it is i					ed)			
Service: Routine Inspection Reinspection Complaint Construction/Pre-opening 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 compli	In = In compliance N/A = Not Applicable N/O = Not Obse Critical Risk Factors for Disease			Maj = N Out	= Major violation Out = Items not in compliance COS = Correct			= Corrected	On Site	COS
(In)	1. Demonstration of knowledge			Out	COS	24. Person in charge present and performs duties			Out	COS
(fir)		municable disease restrictions				25. Personal cleanling	ness and hair restraints			
N/O		harge of eyes, nose, mouth				26. Approved thawi				
N/O N/O		g, tasting, drinking, tobacco use s clean & properly washed, glove use	-			27. Food separated a 28. Washing fruits a				
(10)		Iwashing facilities available					s properly identified, stored			
(In) N/A N/O							storage, 31. Self service 32. Labeled			
	8. Time as a public health control, records					33. Nonfood contac				
In N/A N/O In N/A N/O		Proper cooling methods Proper cooking time and temps					cilities maintained, test strip: sils, approved, clean good re	×	-	
In N/A N/O		eating temperature for hot holding					isils and linens, storage and u	X		
In N/A N/O		12. Returned and reservice of food				37. Vending Machin				
(in) N/A N/O		d safe and unadulterated		-		38. Adequate ventila				
In N/A N/O	14. Food contact surfaces clean and sanitized 15. Food from approved source			-			s provided and accurate s properly used and stored			
In NA NO							ing, proper backflow prevention			
In N/A N/O	In N/A N/O 18. Compliance with HACCP plan						e properly disposed; facilities maintained			
				-			es supplied, properly constructed, clean			
In (IVA)	In (V/A) 20. Health care/ School prohibited food 21. Hot & cold water. Temp: 20 °F			×	-		an, vermin proof; personal items separate and ceilings maintained and clean			
21. Hot & cold water. Temp. 22. Wastewater properly disposed			1	1			living or sleeping quarters	×		
(In) 23. No rodents, insects, birds, animals							ermit & inspection report ava			
						48. Plan Review Re	quired			
No PHF []										
°F Food Location				o.E	°F Food Location					
40 ECLA	1-5	DISPLAY CASE FRIDGE								
Causas	CAUSAGE COOLING IN ICE									
11/ (3	168 GRAUY BATH									
CHT ATOR AUALITICA										
	40 WATERMEIN PREP COOLER									
	113471 -161									
39 RIBS		FRIDGE								
Comments:										
										455
ED ADIU	ST -	THE MIATER T	EMI	00	0 -	THAT III	ARM INIATE	1./7	1000	P=)
ED ADJUST THE WATER TEMP SO THAT WARM WATER (7100°F)										
BUT NOT EXTREMELY HOT WATER (>150°F) IS DELIVERED TO										
HAND WACH SINKS.										
BE LABEL ALL BULK FOOD STORAGE BINS AND POWDERS SPICES										
NOT EASILY RECOGNIZABLE, 35 REPAIR THE PREP COOLER (KITCHEN) HANDLE, IT HAS FALLEN OFF.										
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(33) 1-6-1	-(R	THE PREP COT	بال ال	15/	-11	CHEN I TT	ANDUE	147	HUC	-
Received By:	(R)	I A PREP CON	ما ا		REHS			147	OF	F.

OFFICIAL INSPECTION REPORT

Continuation Sheet

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Name of Facility / DBA: Inspection Date:
HECHO ON YTH STREET 7/23
Address:
Owner/Permitee:
Comments:
(36) STORE ALL DRINKING GLASSES ON A TRAY OF WITH
LIP SIDE UP SO THAT DRINKING SURFACE ISN'T CONTAMINATE BY SURFACES THAT ARE NOT CLEANED REGULARLY. 43 CLEAN THE WALLS CEILING AROUND THE H.V. A.C
BY SURFACES THAT ARE NOT CLEANED REGULARLY.
45 CLEAN THE WAYS CELLIOS AROUND THE HVAC
RETURNS IN THE KITCHEN
Received By: REHS:
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