

FOOD FACILITY INSPECTION REPORT
GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

247 North Villa Avenue, Willows, CA 95988
 Phone (530) 934-6102 FAX (530) 934-6103

Name of Facility/ DBA: KENTUCKY FRIED CHICKEN		Inspection Date: 7/8/21	
Address: 226 N. HUMBOLDT AVE. WILLOWS		Reinspection Date (on or after): REPEAT VIOLATIONS MUST BE CORRECTED TO AVOID FEES. 9/8/21 <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: HANK APODACA	Phone No.:	Inspection Time: 4:00	Permit Exp. Date:
Certified Food Handler: MGR. NOE REYES		Certificate/Expiration Date: 2/10/23 <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		Out	COS
<input checked="" type="checkbox"/>		1. Demonstration of knowledge					24. Person in charge present and performs duties			
<input checked="" type="checkbox"/>		2. Communicable disease restrictions					25. Personal cleanliness and hair restraints			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> N/O	3. Discharge of eyes, nose, mouth					26. Approved thawing methods used			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> N/O	4. Eating, tasting, drinking, tobacco use					27. Food separated and protected			
<input checked="" type="checkbox"/>	<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			<input checked="" type="checkbox"/>		29. Toxic substances properly identified, stored and used			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	7. Proper hot and cold food holding temps					30. Food storage, 31. Self service, 32. Labeled			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> N/A	8. Time as a public health control, records					33. Nonfood contact surfaces clean			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	9. Proper cooling methods					34. Warewashing facilities maintained, test strips			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	10. Proper cooking time and temps					35. Equipment, utensils, approved, clean good repair		<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	11. Reheating temperature for hot holding					36. Equipment, utensils and linens, storage and use			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	12. Returned and reserve of food					37. Vending Machines			
<input checked="" type="checkbox"/>		13. Food safe and unadulterated					38. Adequate ventilation and lighting			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> 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"/>	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	16. Shell stock tags, 17. Gulf Oyster regs					41. Plumbing, proper backflow prevention			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	18. Compliance with HACCP plan					42. Garbage properly disposed; facilities maintained			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	19. Advisory for raw/undercooked food					43. Toilet facilities supplied, properly constructed, clean			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> N/A	20. Health care/ School prohibited food					44. Premises clean, vermin proof; personal items separate			
<input checked="" type="checkbox"/>		21. Hot & cold water. Temp: 90 °F			<input checked="" type="checkbox"/>		45. Floors, walls and ceilings maintained and clean		<input checked="" type="checkbox"/>	
<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			<input checked="" type="checkbox"/>		47. Signs posted; Permit & inspection report available			
							48. Plan Review Required			

No PHF []					
°F	Food	Location	°F	Food	Location
158	BEANS	ATOP S. TABLE	33	COLE SAW	WALK-IN FRIDGE
185	FRIED CHICKEN	HOT HOLDING CABINET			
40	COLE SAW	COLD TABLE			
28	CHICKEN (RAW)	WALK-IN FRIDGE			

Comments:
-NO CRITICAL VIOLATIONS BUT REPEAT VIOLATIONS REMAIN. CORRECT A.S.A.P. TO AVOID RE-INSPECTION FEES.

VIOLATIONS:

6) ALL HANDWASH STATIONS SHALL BE AVAILABLE TO WASH HANDS AT ALL TIMES. 2 OBSERVED SINK NEAR DRIVE-THRU THAT WAS BLOCKED BY TRASH CAN.

2) FACILITY CONTINUES TO HAVE HOT WATER ISSUES TO SOME

Received By: **[Signature]** REHS: **ANDREW REYES**

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Continuation Sheet
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Comments: VIOLATIONS (CONT.)

- 21 SINKS IN THE RESTAURANT. SOME FIXTURES GET VERY HOT (7120°F) & OTHERS DO NOT GET HOT ENOUGH (HAND SINK FRONT @ 90°F, BATHROOM SINKS @ 90°F). ALL HAND SINKS SHALL HAVE WARM WATER OF AT LEAST 100°F. REPEAT VIOLATION!
- 23 KEEP FACILITY FREE OF ALL PESTS, INSECTS & VERMIN AT ALL TIMES. 2 OBSERVED A FEW FLIES AROUND THE RESTAURANT.
- 35 CLEAN & SANITIZE THE SODA MACHINE NOZZLES ON A DAILY BASIS. 2 NOZZLES OBSERVED TO BE MOLDY.
- 35 CLEAN/DEGREASE HOOD BAFFLES ABOVE FRYERS IN THE KITCHEN.
- 15 CLEAN & SANITIZE FLOORING IN THE BREAK ROOM AREA, ESPECIALLY BEHIND & UNDER STORAGE RACKS.
- 45 REPAIR/REPLACE BROKEN TILE IN THE MOP SINK BASIN. 2 OBSERVED CRACKED & BROKEN TILE WITH WATER SEEPING DOWN TO SUB-FLOOR.

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