

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: <i>CK Price Intermediate School</i>		Inspection Date: <i>4/14/17</i>	
Address: <i>1212 Main St, Orland, CA 95953</i>		Reinspection Date (on or after): <i>Next Inspection</i> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <i>Orland Unified School District</i>	Phone No.: <i>855-1225 x153</i>	Inspection Time: <i>11:25 am</i>	Permit Exp. Date:
Certified Food Handler: <i>Jennifer Schermer (+3 others)</i>		Certificate Expiration Date: <i>5/14/20</i> <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 ("CalCode"), Beginning with section 113700, California Health and Safety Code (See reverse side of sheet for summary)</i>			

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
<i>In</i>									24. Person in charge present and performs duties		
<i>In</i>									25. Personal cleanliness and hair restraints		
<i>In</i>	N/O								26. Approved thawing methods used		
<i>In</i>	N/O								27. Food separated and protected		
<i>In</i>	N/O								28. Washing fruits and vegetables		
<i>In</i>									29. Toxic substances properly identified, stored and used		
<i>In</i>	N/A	N/O							30. Food storage, 31. Self service, 32. Labeled		
<i>In</i>	N/A								33. Nonfood contact surfaces clean		
<i>In</i>	N/A	<i>N/O</i>							34. Warewashing facilities maintained, test strips		
<i>In</i>	N/A	<i>N/O</i>							35. Equipment, utensils, approved, clean good repair		
<i>In</i>	N/A	<i>N/O</i>							36. Equipment, utensils and linens, storage and use		
<i>In</i>	N/A	<i>N/O</i>							37. Vending Machines		
<i>In</i>									38. Adequate ventilation and lighting		
<i>In</i>	N/A	N/O							39. Thermometers provided and accurate		
<i>In</i>									40. Wiping cloths properly used and stored		
<i>In</i>	N/A	N/O							41. Plumbing, proper backflow prevention		
<i>In</i>	N/A	N/O							42. Garbage properly disposed; facilities maintained		
<i>In</i>	N/A	N/O							43. Toilet facilities supplied, properly constructed, clean		
<i>In</i>	N/A								44. Premises clean, vermin proof; personal items separate		
<i>In</i>									45. Floors, walls and ceilings maintained and clean		
<i>In</i>									46. No unapproved living or sleeping quarters		
<i>In</i>									47. Signs posted; Permit & inspection report available		
<i>In</i>									48. Plan Review Required		

No PHF []					
°F	Food	Location	°F	Food	Location
<i>145</i>	<i>Pizza</i>	<i>small metro line warmer (vulcan)</i>	<i>141</i>	<i>Spaghetti</i>	<i>Left hot line</i>
<i>139</i>	<i>Pizza</i>	<i>Tall Metro warmer by stove</i>	<i>39</i>	<i>Milk</i>	<i>Walk in cooler</i>

Comments:

1) Provide warm water at 100-108°F at premix handwash sink in restroom. Measured 66°F.

Received By: *[Signature]* REHS: *John H. Wells*