

**FOOD FACILITY INSPECTION REPORT**  
**GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT**

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

Name of Facility/ DBA: <b>REBER</b>		Inspection Date: <b>1/12/15</b>	
Address: <b>590 CAPAY AVE, HAMILTON CITY</b>		Reinspection Date (on or after): <b>NEXT INSPECTION</b> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <b>ARIELLE DANAN</b>	Phone No.:	Inspection Time: <b>9:00</b>	Permit Exp. Date:
Certified Food Handler: <b>N/A (COMMISARY)</b>		Certificate Expiration Date: <b>—</b> <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
In			1. Demonstration of knowledge				24. Person in charge present and performs duties				
In			2. Communicable disease restrictions				25. Personal cleanliness and hair restraints				
In		N/O	3. Discharge of eyes, nose, mouth				26. Approved thawing methods used				
In		N/O	4. Eating, tasting, drinking, tobacco use				27. Food separated and protected				
In		N/O	5. Hands clean & properly washed, glove use				28. Washing fruits and vegetables				
In			6. Handwashing facilities available				29. Toxic substances properly identified, stored and used				
In	N/A	N/O	7. Proper hot and cold food holding temps				30. Food storage, 31. Self service, 32. Labeled				
In	N/A		8. Time as a public health control, records				33. Nonfood contact surfaces clean				
In	N/A	N/O	9. Proper cooling methods				34. Warewashing facilities maintained, test strips				
In	N/A	N/O	10. Proper cooking time and temps				35. Equipment, utensils, approved, clean good repair			X	
In	N/A	N/O	11. Reheating temperature for hot holding				36. Equipment, utensils and linens, storage and use				
In	N/A	N/O	12. Returned and reservice of food				37. Vending Machines				
In			13. Food safe and unadulterated				38. Adequate ventilation and lighting				
In	N/A	N/O	14. Food contact surfaces clean and sanitized				39. Thermometers provided and accurate				
In			15. Food from approved source				40. Wiping cloths properly used and stored				
In	N/A	N/O	16. Shell stock tags, 17. Gulf Oyster regs				41. Plumbing, proper backflow prevention				
In	N/A	N/O	18. Compliance with HACCP plan				42. Garbage properly disposed; facilities maintained				
In	N/A	N/O	19. Advisory for raw/undercooked food				43. Toilet facilities supplied, properly constructed, clean				
In	N/A	N/O	20. Health care/ School prohibited food				44. Premises clean, vermin proof, personal items separate				
In			21. Hot & cold water. Temp: <b>120</b> °F				45. Floors, walls and ceilings maintained and clean			X	
In			22. Wastewater properly disposed				46. No unapproved living or sleeping quarters				
In			23. No rodents, insects, birds, animals				47. Signs posted; Permit & inspection report available				
							48. Plan Review Required				

No PHF [ ]					
°F	Food	Location	°F	Food	Location
40	<del>MILK</del>	WALK-IN FRIDGE			
40	EGGS	WALK-IN FRIDGE			

Comments: CORRECT THE FOLLOWING:

**(35)** ALL APPLIANCE ADDITIONS, REMODELS & CHANGED WITH THE FACILITY MUST BE PLAN CHECKED AND APPROVED BY G.C.E.H.

N/OBSERVED WHITE FRIGIDAIRE FREEZER INSIDE COMMISARY.

**(45)** CLEAN/SANITIZE WALLS/CEILING AROUND THE FACILITY. THEY ARE A BIT GRIMY & DIRTY.

Received By: U.S. MAIL                      REHS: ANDREW A. PERO