

# 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: <u>HAMILTON UNION HIGH SCHOOL</u>		Inspection Date: <u>8/15/17</u>	
Address: <u>Highway 324 45, Hamilton City, CA</u>		Reinspection Date (on or after): <u>NEXT INSPECTION</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>HAMILTON UNION HIGH SCHOOL</u>	Phone No.:	Inspection Time: <u>12:00</u>	Permit Exp. Date:
Certified Food Handler: <u>SEAN MONTGOMERY</u>		Certificate Expiration Date: <u>10/4/17</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 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			
<u>In</u>		1. Demonstration of knowledge				24. Person in charge present and performs duties		
<u>In</u>		2. Communicable disease restrictions				25. Personal cleanliness and hair restraints		
<u>In</u>	<u>N/O</u>	3. Discharge of eyes, nose, mouth				26. Approved thawing methods used		
<u>In</u>	<u>N/O</u>	4. Eating, tasting, drinking, tobacco use				27. Food separated and protected		
<u>In</u>	<u>N/O</u>	5. Hands clean & properly washed, glove use				28. Washing fruits and vegetables		
<u>In</u>		6. Handwashing facilities available				29. Toxic substances properly identified, stored and used		
<u>In</u>	<u>N/A</u>	7. Proper hot and cold food holding temps				30. Food storage, 31. Self service, 32. Labeled		
<u>In</u>	<u>N/A</u>	8. Time as a public health control, records				33. Nonfood contact surfaces clean		
<u>In</u>	<u>N/A</u>	9. Proper cooling methods				34. Warewashing facilities maintained, test strips		
<u>In</u>	<u>N/A</u>	10. Proper cooking time and temps				35. Equipment, utensils, approved, clean good repair		<u>X</u>
<u>In</u>	<u>N/A</u>	11. Reheating temperature for hot holding				36. Equipment, utensils and linens, storage and use		
<u>In</u>	<u>N/A</u>	12. Returned and reservice of food				37. Vending Machines		
<u>In</u>		13. Food safe and unadulterated				38. Adequate ventilation and lighting		
<u>In</u>	<u>N/A</u>	14. Food contact surfaces clean and sanitized				39. Thermometers provided and accurate		
<u>In</u>		15. Food from approved source				40. Wiping cloths properly used and stored		
<u>In</u>	<u>N/A</u>	16. Shell stock tags, 17. Gulf Oyster regs				41. Plumbing, proper backflow prevention		<u>X</u>
<u>In</u>	<u>N/A</u>	18. Compliance with HACCP plan				42. Garbage properly disposed; facilities maintained		
<u>In</u>	<u>N/A</u>	19. Advisory for raw/undercooked food				43. Toilet facilities supplied, properly constructed, clean		
<u>In</u>	<u>N/A</u>	20. Health care/ School prohibited food				44. Premises clean, vermin proof; personal items separate		
<u>In</u>		21. Hot & cold water. Temp: <u>120<sup>+</sup></u> °F				45. Floors, walls and ceilings maintained and clean		<u>X</u>
<u>In</u>		22. Wastewater properly disposed				46. No unapproved living or sleeping quarters		
<u>In</u>		23. No rodents, insects, birds, animals				47. Signs posted; Permit & inspection report available		
						48. Plan Review Required		<u>AP</u>

No PHF [ ]					
°F	Food	Location	°F	Food	Location
<u>168</u>	<u>BURRITOS</u>	<u>STEAK TABLE</u>			
<u>200</u>	<u>PIZZA</u>	<u>DILIGENT PREP</u>			
<u>40</u>	<u>MILK</u>	<u>OUTSIDE WALK-IN</u>			

Comments:

- NO CRITICAL VIOLATIONS

CORRECT THE FOLLOWING:

(35) DEFROST THE OUTSIDE WALK-IN FREEZER, THERE IS A LARGE ACCUMULATION OF ICE INSIDE.

(4) RAISE INDIRECT PLUMBING UNDER AUTO DISHWASHER SO THAT THERE IS AT LEAST A 1" AIR GAP TO FLOOR RIM OF FLOOR DRAIN.

(5) REPAIR/REPLACE KITCHEN FLOORING. VINYL FLOORING IS

Received By: Sean Montgomery REHS:

OFFICIAL INSPECTION REPORT

Continuation Sheet

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Page 2 of 2

Name of Facility/ DBA: <u>HAMILTON Union High School</u>	Inspection Date: <u>5/15/17</u>
Address: <u>PAGE 2</u>	
Owner/Permitee: <u>PAGE 2</u>	

Comments:

CORRECT THE FOLLOWING (CONT.):

45 IN DIS-REPAIR & FALLING APART.

NOTE: ANY INFRASTRUCTURE CHANGES, APPLIANCE CHANGES,  
FLOORING CHANGES, ETC. MAY BE SUBJECT TO  
PLAN CHECK BY GLENN CO. ENV. HEALTH.  
CHECK WITH OUR OFFICE BEFORE MAKING  
CHANGES

Received By:

Sen [Signature]

REHS:

Andrew P [Signature]