

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>EL TORO LOCO</u>		Inspection Date: <u>5/25/17</u>	
Address: <u>570 MAIN ST., HAMILTON CITY, CA</u>		Reinspection Date (on or after): <u>Any 80.00</u> <u>6/25/17</u> RE-INSPECTION FEE WILL BE 2142.00 <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>ISKANDER HUSSEIN</u>	Phone No.:	Inspection Time: <u>11:00</u>	Permit Exp. Date:
Certified Food Handler: <u>OSCAR PINEDA</u>		Certificate Expiration Date: <u>4/19/22</u> <small>(Certificate expires five years after it is issued)</small>	
Service: <input type="checkbox"/> Routine Inspection <input checked="" type="checkbox"/> Reinspection <input type="checkbox"/> Complaint <input type="checkbox"/> Construction/Pre-opening <input type="checkbox"/> Other:			
Applicable Law <u>CALIFORNIA RETAIL FOOD CODE ("CalCode), Beginning with section 113700, California Health and Safety Code (See reverse side of sheet for summary)</u>			

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

No PHF [] <u>NO TEMPS TAKEN AT RE-INSPECTION</u>					
°F	Food	Location	°F	Food	Location

Comments:
CORRECT REMAINING VIOLATIONS TO AVOID CLOSURE/ RE-INSPECTION FEES.
CRITICAL VIOLATIONS
(23) KEEP FACILITY FREE OF ALL PESTS, INSECTS, RODENTS ETC. AT ALL TIMES. A FACILITY HAS MADE SOME STRIDES TO ELIMINATE COCKROACH INFESTATION, HOWEVER MORE MUST BE DONE AS LIVE ROACHES & THE DROPPINGS ARE

Received By: <u>[Signature]</u>	REHS: <u>Andrew Pardo</u>
---------------------------------	---------------------------