

**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>LA CASCADA MEXICAN RESTAURANT</b>		Inspection Date: <b>8/3/13</b>	
Address: <b>458 N. HUMBOLDT AVE, WILLOWS, CA</b>		Reinspection Date (on or after): <b>NEXT INSPECTION</b> <small>(Reinspections are subject to fees)</small>	
Owner/Permitee: <b>JULIO CESAR FLORES</b>	Phone No.:	Inspection Time: <b>1:30</b>	Permit Exp. Date:
Certified Food Handler: <b>JULIO FLORES</b>		Certificate Expiration Date: <b>7/16/16</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 <b>CALIFORNIA RETAIL FOOD CODE ("CalCode), Beginning with section 113700, California Health and Safety Code</b> (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	
<input checked="" type="checkbox"/>	In	N/O		1. Demonstration of knowledge					24. Person in charge present and performs duties		
<input checked="" type="checkbox"/>	In			2. Communicable disease restrictions					25. Personal cleanliness and hair restraints		
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/O		3. Discharge of eyes, nose, mouth					26. Approved thawing methods used		
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/O		4. Eating, tasting, drinking, tobacco use					27. Food separated and protected		X
<input checked="" type="checkbox"/>	In	N/O		5. Hands clean & properly washed, glove use					28. Washing fruits and vegetables		
<input type="checkbox"/>	In			6. Handwashing facilities available			X		29. Toxic substances properly identified, stored and used		
<input type="checkbox"/>	In	N/A	N/O	7. Proper hot and cold food holding temps			X		30. Food storage, 31. Self service, 32. Labeled		
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> N/O	8. Time as a public health control, records					33. Nonfood contact surfaces clean		
<input type="checkbox"/>	In	N/A	<input checked="" type="checkbox"/> N/O	9. Proper cooling methods					34. Warewashing facilities maintained, test strips		
<input checked="" type="checkbox"/>	In	N/A	N/O	10. Proper cooking time and temps					35. Equipment, utensils, approved, clean good repair		X
<input checked="" type="checkbox"/>	In	N/A	N/O	11. Reheating temperature for hot holding					36. Equipment, utensils and linens, storage and use		X
<input type="checkbox"/>	In	N/A	<input checked="" type="checkbox"/> N/O	12. Returned and reservice of food					37. Vending Machines		
<input type="checkbox"/>	In			13. Food in good condition, safe, unadulterated					38. Adequate ventilation and lighting		
<input type="checkbox"/>	In	N/A	<input checked="" type="checkbox"/> N/O	14. Food contact surfaces clean and sanitized					39. Thermometers provided and accurate		
<input checked="" type="checkbox"/>	In			15. Food from approved source					40. Wiping cloths properly used and stored		X
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A	N/O	16. Shell stock tags, 17. Gulf Oyster regs					41. Plumbing, proper backflow prevention		
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A	N/O	18. Compliance with HACCP plan					42. Garbage properly disposed; facilities maintained		
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A	N/O	19. Advisory for raw/undercooked food					43. Toilet facilities supplied, properly constructed, clean		
<input type="checkbox"/>	In	<input checked="" type="checkbox"/> N/A		20. Health care/ School prohibited food					44. Premises clean and vermin proof; personal items separate		
<input checked="" type="checkbox"/>	In			21. Hot & cold water. Temp: <b>170°</b> °F					45. Floors, walls and ceilings maintained and clean		
<input checked="" type="checkbox"/>	In			22. Wastewater properly disposed					46. No unapproved living or sleeping quarters		
<input checked="" type="checkbox"/>	In			23. No rodents, insects, birds, animals					47. Signs posted; Last inspection report available		

No PHF [ ]					
°F	Food	Location	°F	Food	Location
41	THOUSAND ISLAND	UNDER FRONT PREP COOLER	105	CHILI VERDE	SHELF / ATOP STOVE
41	MILK	2-DOOR TRAILSON	40	RICE	ATOP STEAM TABLE
39	POLLO	WALK-IN FRIDGE			
108	CHILI RELLANO	ATOP PREP TABLE			

Comments:  
 - NO CRITICAL VIOLATIONS

OTHER VIOLATIONS:

⑥ BOTH FRONT & BACK HANDWASH SINKS SHALL BE PROPERLY SUPPLIED WITH SOAP & PAPER TOWELS AT ALL TIME. FRONT PREP STATION HAND SINK LACKED HAND TOWELS.

⑦ HOLD ALL POTENTIALLY HAZARDOUS FOOD AT/BELOW 41°F OR AT/ABOVE 135°F AT ALL TIMES. IF ACTIVELY COOLING, COOL RAPIDLY USING AN APPROVED METHOD. OBSERVED THE FOLLOWING OUT OF TEMP: 1) CHILI RELLANO @ 108°F 2) CHILI VERDE @ 105°F

Received By: [Signature] REHS: ANDREW A. FEYD

OFFICIAL INSPECTION REPORT

Continuation Sheet

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Name of Facility/ DBA: <u>LA CASCADE MEXICAN RESTAURANT</u>	Inspection Date: <u>8/3/13</u>
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Comments:

OTHER VIOLATIONS (CONT.)

- 7 OPERATOR RELOCATED RELIANO TO REFRIGERATION FOR COOLING & CHILI VERDE WAS REHEATED TO 165°F KILL TEMP.
- 27 STORE ALL RAW P.H.F. AWAY ~~FROM~~ OR BELOW READY TO EAT FOOD OR PRODUCE. OBSERVED RAW EGGS ABOVE PEPPERS.
- 35 CLEAN/SANITIZE/DEGREASE AROUND FRYER & ON ADJACENT PREP TABLE.
- 36 USE ONLY SCOOPERS THAT ARE EASILY CLEANABLE, NON-ABSORBANT & HAVE A HANDLE. BOWLS ARE NOT ALLOWED.
- 40 ALL WIPING CLOTHES SHALL BE PLACED IN A SOILED LINEN BAG OR BUCKET OF SANITIZER WHEN NOT IN USE. (100 PPM CHLORINE OR 200PPM QUAT. AMMONIUMS).

Received By: <u>[Signature]</u>	REHS: <u>Andrew A. P.</u>
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