

# 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: <i>Billy &amp; Emily Donuts</i>		Inspection Date: <i>9/14/15</i>	
Address: <i>55 E. Walker St, Orland, CA 95963</i>		Reinspection Date (on or after): <i>Next Inspection</i> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <i>Kao Lim</i>	Phone No.: <i>865-4324</i>	Inspection Time: <i>11:20am</i>	Permit Exp. Date:
Certified Food Handler: <i>Kelly Long</i>		Certificate Expiration Date: <i>3/31/20</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
<input checked="" type="checkbox"/> In		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 checked="" type="checkbox"/> In	N/O	3. Discharge of eyes, nose, mouth				26. Approved thawing methods used				
<input checked="" type="checkbox"/> In	N/O	4. Eating, tasting, drinking, tobacco use				27. Food separated and protected				
<input checked="" type="checkbox"/> In	N/O	5. Hands clean & properly washed, glove use				28. Washing fruits and vegetables				
<input checked="" type="checkbox"/> In		6. Handwashing facilities available				29. Toxic substances properly identified, stored and used				
<input checked="" type="checkbox"/> In	N/A	N/O				30. Food storage, 31. Self service, 32. Labeled			X	
<input checked="" type="checkbox"/> In	N/A					33. Nonfood contact surfaces clean				
<input checked="" type="checkbox"/> In	N/A	N/O				34. Warewashing facilities maintained, test strips				
<input checked="" type="checkbox"/> In	N/A	N/O				35. Equipment, utensils, approved, clean good repair				
<input checked="" type="checkbox"/> In	N/A	N/O				36. Equipment, utensils and linens, storage and use				
<input checked="" type="checkbox"/> In	N/A	N/O				37. Vending Machines				
<input checked="" type="checkbox"/> In	N/A	N/O				38. Adequate ventilation and lighting				
<input checked="" type="checkbox"/> In	N/A	N/O				39. Thermometers provided and accurate				
<input checked="" type="checkbox"/> In	N/A	N/O				40. Wiping cloths properly used and stored				
<input checked="" type="checkbox"/> In	N/A	N/O				41. Plumbing, proper backflow prevention				
<input checked="" type="checkbox"/> In	N/A	N/O				42. Garbage properly disposed; facilities maintained				
<input checked="" type="checkbox"/> In	N/A	N/O				43. Toilet facilities supplied, properly constructed, clean				
<input checked="" type="checkbox"/> In	N/A	N/O				44. Premises clean, vermin proof; personal items separate				
<input checked="" type="checkbox"/> In		21. Hot & cold water. Temp: <i>121</i> °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; Permit & inspection report available				
						48. Plan Review Required				

No PHF [ ]					
°F	Food	Location	°F	Food	Location
	<i>40 Bologna</i>	<i>1-Door Cooler</i>			
	<i>40 Milk</i>	<i>2-Door Beverage Cooler</i>			

Comments:  
*Correct the following:*

*30) Store all food 6" above floor. Observed bags of flour on floor.*

Received By: *Kelly Long*      REHS: *John H. Wells*