

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>Orland Stop & Shop</u>		Inspection Date: <u>9/15/17</u>	
Address: <u>10 Walker St, Orland, CA 95953</u>		Reinspection Date (on or after): <u>9/18/17</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>Rajender Grewal</u>	Phone No.: <u>865-5741</u>	Inspection Time: <u>12:25 pm</u>	Permit Exp. Date:
Certified Food Handler: <u>Sukhwinder Grewal</u>		Certificate Expiration Date: <u>4/4/20</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		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		
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		
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		
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		
In									45. Floors, walls and ceilings maintained and clean		
In									46. No unapproved living or sleeping quarters		
In									47. Signs posted; Permit & inspection report available		
In									48. Plan Review Required		

No PHF []					
°F	Food	Location	°F	Food	Location
38	Milk	Walk in Cooler			

Comments:
 * Critical Violations - May lead to closure if not corrected by 9/18/17
 22) Repair drain pipe leak to floor beneath right compartment of utensil sink.
 23) Repair condensers drain line leak at Northeast corner of walk-in.
 Other Violations 6) Provide towels in dispenser at restroom handwash sink.
 13) Provide ~~hand~~ ^{service} towels and paper for donut self-service.
 12) Provide hot water at 120°F. Measured 115°F.

Received By: [Signature] REHS: John H. Wells