

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: <i>The Rusty Wagon</i>		Inspection Date: <i>9/8/17</i>	
Address: <i>420 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>Glenn County Office of Education</i>	Phone No.: <i>988-9132</i>	Inspection Time: <i>11:50 am</i>	Permit Exp. Date:
Certified Food Handler: <i>Christine Jasper</i>		Certificate Expiration Date: <i>5/15/22</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			Maj	Out	COS	Out	COS
Critical Risk Factors for Disease							
<i>In</i>		1. Demonstration of knowledge				24. Person in charge present and performs duties	
<i>In</i>		2. Communicable disease restrictions				25. Personal cleanliness and hair restraints	
<i>In</i>	<i>N/O</i>	3. Discharge of eyes, nose, mouth				26. Approved thawing methods used	
<i>In</i>	<i>N/O</i>	4. Eating, tasting, drinking, tobacco use				27. Food separated and protected	
<i>In</i>	<i>N/O</i>	5. Hands clean & properly washed, glove use				28. Washing fruits and vegetables	
<i>In</i>		6. Handwashing facilities available				29. Toxic substances properly identified, stored and used	
<i>In</i>	<i>N/A</i>	<i>N/O</i> 7. Proper hot and cold food holding temps				30. Food storage, 31. Self service, 32. Labeled	<i>X</i>
<i>In</i>	<i>N/A</i>	8. Time as a public health control, records				33. Nonfood contact surfaces clean	
<i>In</i>	<i>N/A</i>	<i>N/O</i> 9. Proper cooling methods				34. Warewashing facilities maintained, test strips	
<i>In</i>	<i>N/A</i>	<i>N/O</i> 10. Proper cooking time and temps				35. Equipment, utensils, approved, clean good repair	
<i>In</i>	<i>N/A</i>	<i>N/O</i> 11. Reheating temperature for hot holding				36. Equipment, utensils and linens, storage and use	
<i>In</i>	<i>N/A</i>	<i>N/O</i> 12. Returned and reservice of food				37. Vending Machines	
<i>In</i>		13. Food safe and unadulterated				38. Adequate ventilation and lighting	
<i>In</i>	<i>N/A</i>	<i>N/O</i> 14. Food contact surfaces clean and sanitized				39. Thermometers provided and accurate	
<i>In</i>		15. Food from approved source				40. Wiping cloths properly used and stored	
<i>In</i>	<i>N/A</i>	<i>N/O</i> 16. Shell stock tags, 17. Gulf Oyster regs				41. Plumbing, proper backflow prevention	
<i>In</i>	<i>N/A</i>	<i>N/O</i> 18. Compliance with HACCP plan				42. Garbage properly disposed; facilities maintained	
<i>In</i>	<i>N/A</i>	<i>N/O</i> 19. Advisory for raw/undercooked food				43. Toilet facilities supplied, properly constructed, clean	
<i>In</i>	<i>N/A</i>	<i>N/O</i> 20. Health care/ School prohibited food				44. Premises clean, vermin proof; personal items separate	
<i>In</i>		21. Hot & cold water. Temp: <i>132</i> °F				45. Floors, walls and ceilings maintained and clean	
<i>In</i>		22. Wastewater properly disposed				46. No unapproved living or sleeping quarters	
<i>In</i>		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>39</i>	<i>Raw Milk Cheese</i>	<i>Front room display cooler</i>			
<i>36</i>	<i>Pepper Jack Cheese</i>	<i>Back room 2-door cooler</i>			

Comments:

32) Properly label Elk pepper sticks (s, all foods) with:

- Name of Producer*
- Producer City/State*
- Common Name of Food*
- List of ingredients in order of predominance by weight*
- Net weight of contents*

Received By: *x Carol Van H* REHS: *John H. Wells*