

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: HAMILTON Union High School		Inspection Date: 11/13/17
Address: Highway 32 & 45, Hamilton City, CA		Reinspection Date (on or after): NEXT INSPECTION <small>(Reinspections are subject to fees)</small>
Owner/Permittee: HAMILTON Union High School	Phone No.:	Inspection Time: 12:00
Certified Food Handler: - AWAITING NEW CERT (TEST TAKEN)		Permit Exp. Date:
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			
<input checked="" type="checkbox"/> In									24. Person in charge present and performs duties		
<input checked="" type="checkbox"/> In									25. Personal cleanliness and hair restraints		
<input checked="" type="checkbox"/> In	<input checked="" type="checkbox"/> N/O								26. Approved thawing methods used		
<input checked="" type="checkbox"/> In	<input checked="" type="checkbox"/> N/O								27. Food separated and protected		
<input checked="" type="checkbox"/> In	<input checked="" type="checkbox"/> N/O								28. Washing fruits and vegetables		
<input checked="" type="checkbox"/> In									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		
<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		X
<input checked="" type="checkbox"/> In	N/A	N/O							36. Equipment, utensils and linens, storage and use		X
<input checked="" type="checkbox"/> In	N/A	N/O							37. Vending Machines		
<input checked="" type="checkbox"/> In									38. Adequate ventilation and lighting		
<input checked="" type="checkbox"/> In	N/A	N/O							39. Thermometers provided and accurate		
<input checked="" type="checkbox"/> In									40. Wiping cloths properly used and stored		
<input checked="" type="checkbox"/> In	<input checked="" type="checkbox"/> N/A	N/O							41. Plumbing, proper backflow prevention		
<input checked="" type="checkbox"/> In	<input checked="" type="checkbox"/> N/A	N/O							42. Garbage properly disposed; facilities maintained		
<input checked="" type="checkbox"/> In	<input checked="" type="checkbox"/> N/A	N/O							43. Toilet facilities supplied, properly constructed, clean		
<input checked="" type="checkbox"/> In	<input checked="" type="checkbox"/> N/A	N/O							44. Premises clean, vermin proof; personal items separate		
<input checked="" type="checkbox"/> In	<input checked="" type="checkbox"/> N/A								45. Floors, walls and ceilings maintained and clean		
<input checked="" type="checkbox"/> In									46. No unapproved living or sleeping quarters		
<input checked="" type="checkbox"/> In									47. Signs posted; Permit & inspection report available		
<input checked="" type="checkbox"/> In									48. Plan Review Required		

No PHF []					
°F	Food	Location	°F	Food	Location
185	CHICKEN	ATOP STOVE			
165	RICE	ATOP STEAM TABLE			
40	TURKEY	WALK-IN FRIDGE			

Comments:
 - NO CRITICAL VIOLATIONS

OTHER VIOLATIONS

35 CLEAN/SANITIZE THE INSIDE OF THE WALK-IN FRIDGE. THE WALLS ARE VERY MOLDY GRIMY.

36 RE-LOCATE THE CONVECTION OVEN SO THAT IT IS UNDER THE HOOD COMPLETELY.

36 THE OUTSIDE WALK-IN IS UNSAFE DUE TO ACCUMULATION OF ICE, THE SHELVING STABILITY & TILT OF THE UNIT. PUT NEW EQUIPMENT ONLINE.

Received By: *[Signature]* REHS: **ANDREW PERRY**