

# 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: <b>ELK CREEK SCHOOL</b>		Inspection Date: <b>11/29/18</b>	
Address: <b>300 SAN HEDRIN ROAD, ELK CREEK</b>		Reinspection Date (on or after): <b>NEXT INSPECTION</b> <small>(Reinspections are subject to fees)</small>	
Owner/Permitee: <b>STONY CREEK JOINT USD</b>	Phone No.:	Inspection Time: <b>12:00</b>	Permit Exp. Date:
Certified Food Handler: <b>RONDA WYCOFF</b>		Certificate/Expiration Date: <b>1/29/19</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 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
<input checked="" type="checkbox"/>			1. Demonstration of knowledge				24. Person in charge present and performs duties				
<input checked="" type="checkbox"/>			2. Communicable disease restrictions				25. Personal cleanliness and hair restraints				
<input checked="" type="checkbox"/>	N/A	N/O	3. Discharge of eyes, nose, mouth				26. Approved thawing methods used				
<input checked="" type="checkbox"/>	N/A	N/O	4. Eating, tasting, drinking, tobacco use				27. Food separated and protected				
<input checked="" type="checkbox"/>	N/A	N/O	5. Hands clean & properly washed, glove use				28. Washing fruits and vegetables				<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	N/A	N/O	6. Handwashing facilities available				29. Toxic substances properly identified, stored and used				
<input checked="" type="checkbox"/>	N/A	N/O	7. Proper hot and cold food holding temps				30. Food storage, 31. Self service, 32. Labeled			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	N/A	N/O	8. Time as a public health control, records				33. Nonfood contact surfaces clean				
<input checked="" type="checkbox"/>	N/A	N/O	9. Proper cooling methods				34. Warewashing facilities maintained, test strips				
<input checked="" type="checkbox"/>	N/A	N/O	10. Proper cooking time and temps				35. Equipment, utensils, approved, clean good repair				
<input checked="" type="checkbox"/>	N/A	N/O	11. Reheating temperature for hot holding				36. Equipment, utensils and linens, storage and use				
<input checked="" type="checkbox"/>	N/A	N/O	12. Returned and reservice of food				37. Vending Machines				
<input checked="" type="checkbox"/>	N/A	N/O	13. Food safe and unadulterated				38. Adequate ventilation and lighting				
<input checked="" type="checkbox"/>	N/A	N/O	14. Food contact surfaces clean and sanitized				39. Thermometers provided and accurate				
<input checked="" type="checkbox"/>	N/A	N/O	15. Food from approved source				40. Wiping cloths properly used and stored				
<input checked="" type="checkbox"/>	N/A	N/O	16. Shell stock tags, 17. Gulf Oyster regs				41. Plumbing, proper backflow prevention				
<input checked="" type="checkbox"/>	N/A	N/O	18. Compliance with HACCP plan				42. Garbage properly disposed; facilities maintained				
<input checked="" type="checkbox"/>	N/A	N/O	19. Advisory for raw/undercooked food				43. Toilet facilities supplied, properly constructed, clean				
<input checked="" type="checkbox"/>	N/A	N/O	20. Health care/ School prohibited food				44. Premises clean, vermin proof; personal items separate				
<input checked="" type="checkbox"/>			21. Hot & cold water. Temp: <b>120</b> °F				45. Floors, walls and ceilings maintained and clean				<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>			22. Wastewater properly disposed				46. No unapproved living or sleeping quarters				
<input checked="" type="checkbox"/>			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
155	NACHO CHEESE	ACTIVELY SERVING	40	RANCH	WALK-IN FRIDGE
40	RANCH	2-DOOR EVEREST			
39	WHIPPED CREAM	SINGLE DOOR EVEREST			
40	Milk	SELF SERVE FRIDGE			

Comments:

~~\*\*\*CRITICAL VIOLATION\*\*\*~~

**(45) REPAIR LEAKY ROOF & CEILING IN THE KITCHEN AREA IMMEDIATELY, THIS IS A SANITARY HAZARD.**

**CORRECT THE FOLLOWING**

**(30) STORE ALL FOOD AT LEAST 6 INCHES OFF OF THE GROUND. 2 OBSERVED BOXES ON THE FLOOR IN WALK-IN FREEZER CORRECTED **(AT)****

Received By: Ronda Steyn REHS: Andrew P. Perry