

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: <u>Santos Muñoz</u>		Inspection Date: <u>7/2/15</u>	
Address: <u>7163 Highway 32, Orland, CA 95963</u>		Reinspection Date (on or after): <u>Next Inspection</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>Santos Muñoz</u>	Phone No.: <u>865-1319</u>	Inspection Time: <u>12:00pm</u>	Permit Exp. Date:
Certified Food Handler: <u>- None - Farm Stand - Whole produce & prepackaged</u>		Certificate Expiration Date: <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			
In	1. Demonstration of knowledge				24. Person in charge present and performs duties						
In	2. Communicable disease restrictions				25. Personal cleanliness and hair restraints						
In	N/O 3. Discharge of eyes, nose, mouth				26. Approved thawing methods used						
In	N/O 4. Eating, tasting, drinking, tobacco use				27. Food separated and protected						
In	N/O 5. Hands clean & properly washed, glove use				28. Washing fruits and vegetables						
In	6. Handwashing facilities available				29. Toxic substances properly identified, stored and used						
In	N/A N/O 7. Proper hot and cold food holding temps				30. Food storage, 31. Self service, 32. Labeled				X		
In	N/A 8. Time as a public health control, records				33. Nonfood contact surfaces clean						
In	N/A N/O 9. Proper cooling methods				34. Warewashing facilities maintained, test strips						
In	N/A N/O 10. Proper cooking time and temps				35. Equipment, utensils, approved, clean good repair						
In	N/A N/O 11. Reheating temperature for hot holding				36. Equipment, utensils and linens, storage and use						
In	N/A N/O 12. Returned and reservice of food				37. Vending Machines						
In	13. Food safe and unadulterated				38. Adequate ventilation and lighting						
In	N/A N/O 14. Food contact surfaces clean and sanitized				39. Thermometers provided and accurate						
In	15. Food from approved source				40. Wiping cloths properly used and stored						
In	N/A N/O 16. Shell stock tags, 17. Gulf Oyster regs				41. Plumbing, proper backflow prevention						
In	N/A N/O 18. Compliance with HACCP plan				42. Garbage properly disposed; facilities maintained						
In	N/A N/O 19. Advisory for raw/undercooked food				43. Toilet facilities supplied, properly constructed, clean						
In	N/A 20. Health care/ School prohibited food				44. Premises clean, vermin proof; personal items separate						
In	21. Hot & cold water. Temp: °F				45. Floors, walls and ceilings maintained and clean						
In	22. Wastewater properly disposed				46. No unapproved living or sleeping quarters						
In	23. No rodents, insects, birds, animals				47. Signs posted; Permit & inspection report available						
					48. Plan Review Required						

No PHF <input checked="" type="checkbox"/>					
°F	Food	Location	°F	Food	Location

Comments:

25) Label jars of honey with:

- Name of farm
- Address
- Common name of food ("Honey")
- Net weight of contents.

Received By: Andrea Gonzalez REHS: John H. Wells