

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>Orland Stop & Shop</i>		Inspection Date: <i>9/14/17</i>
Address: <i>10 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>Rajinder Krewal</i>	Phone No.: <i>865-5741</i>	Inspection Time: <i>11:45 am</i>
Certified Food Handler: <i>Sukhwinder Krewal</i>	Permit Exp. Date:	
Service: <input checked="checked" type="checkbox"/> Routine Inspection <input type="checkbox"/> Reinspection <input type="checkbox"/> Complaint <input type="checkbox"/> Construction/Pre-opening <input type="checkbox"/> Other:		Certificate Expiration Date: <i>1/24/20</i> <small>(Certificate expires five years after it is issued)</small>
Applicable Law <i>CALIFORNIA RETAIL FOOD CODE</i> ("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						X	29.	Toxic substances properly identified, stored and used				
In	N/A	N/O					30.	Food storage, 31. Self service, 32. Labeled			X	
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	N/A	N/O					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
	<i>41 Burrito</i>	<i>Walkin Display bins</i>			
	<i>39 Milk</i>	<i>Walkin cooler</i>			

Comments:
Provide towels at the handwash sinks.
6) Clean dust from canned goods.

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