

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>BEBER LIVE LIFE JUICE (COMMISARY)</u>		Inspection Date: <u>10/23/15</u>	
Address: <u>590 CADAY AVE, HAMILTON CITY, CA</u>		Reinspection Date (on or after): <small>(Reinspections are subject to fees)</small>	
Owner/Permitee: <u>ARIELLE DANAN</u>	Phone No.:	Inspection Time: <u>9:00</u>	Permit Exp. Date:
Certified Food Handler:		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 <u>CALIFORNIA RETAIL FOOD CODE ("CalCode"), Beginning with section 113700, California Health and Safety Code (See reverse side of sheet for summary)</u>			

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
<u>In</u>			1. Demonstration of knowledge						24. Person in charge present and performs duties				
<u>In</u>			2. Communicable disease restrictions						25. Personal cleanliness and hair restraints				
<u>In</u>		<u>N/O</u>	3. Discharge of eyes, nose, mouth						26. Approved thawing methods used				
<u>In</u>		<u>N/O</u>	4. Eating, tasting, drinking, tobacco use						27. Food separated and protected				
<u>In</u>		<u>N/O</u>	5. Hands clean & properly washed, glove use						28. Washing fruits and vegetables				
<u>In</u>			6. Handwashing facilities available						29. Toxic substances properly identified, stored and used			<u>X</u>	
<u>In</u>	<u>N/A</u>	<u>N/O</u>	7. Proper hot and cold food holding temps						<u>30. Food storage</u> , 31. Self service, 32. Labeled			<u>X</u>	
<u>In</u>	<u>N/A</u>	<u>N/O</u>	8. Time as a public health control, records						33. Nonfood contact surfaces clean				
<u>In</u>	<u>N/A</u>	<u>N/O</u>	9. Proper cooling methods						34. Warewashing facilities maintained, test strips				
<u>In</u>	<u>N/A</u>	<u>N/O</u>	10. Proper cooking time and temps						35. Equipment, utensils, approved, clean good repair			<u>X</u>	
<u>In</u>	<u>N/A</u>	<u>N/O</u>	11. Reheating temperature for hot holding						36. Equipment, utensils and linens, storage and use				
<u>In</u>	<u>N/A</u>	<u>N/O</u>	12. Returned and reservice of food						37. Vending Machines				
<u>In</u>			13. Food safe and unadulterated						38. Adequate ventilation and lighting				
<u>In</u>	<u>N/A</u>	<u>N/O</u>	14. Food contact surfaces clean and sanitized						39. Thermometers provided and accurate				
<u>In</u>			15. Food from approved source						40. Wiping cloths properly used and stored				
<u>In</u>	<u>N/A</u>	<u>N/O</u>	16. Shell stock tags, 17. Gulf Oyster regs						41. Plumbing, proper backflow prevention				
<u>In</u>	<u>N/A</u>	<u>N/O</u>	18. Compliance with HACCP plan						42. Garbage properly disposed; facilities maintained				
<u>In</u>	<u>N/A</u>	<u>N/O</u>	19. Advisory for raw/undercooked food						43. Toilet facilities supplied, properly constructed, clean			<u>X</u>	
<u>In</u>	<u>N/A</u>	<u>N/O</u>	20. Health care/ School prohibited food						44. Premises clean, vermin proof, <u>personal items separate</u>			<u>X</u>	
<u>In</u>			21. Hot & cold water. Temp: <u>120+°F</u>						45. Floors, walls and ceilings maintained and clean			<u>X</u>	
<u>In</u>			22. Wastewater properly disposed						46. No unapproved living or sleeping quarters				
<u>In</u>			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:
-NO CRITICAL VIOLATIONS

OTHER VIOLATIONS:

29 STORE ALL TOXICS, CLEANERS & MEDICINES, ETC. AWAY FROM ANY FOOD SERVED TO THE PUBLIC. OBSERVED CHEMICALS NEXT TO FOOD AT VARIOUS LOCATIONS AROUND FACILITY.

30 STORE ALL FOOD & BINS AT LEAST 6 INCHES OFF OF THE GROUND. OBSERVED BINS (LARGE) ON WALK-IN FLOOR. →

Received By: [Signature] REHS: ANDREW P. [Signature]

OFFICIAL INSPECTION REPORT

Continuation Sheet

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Address:	PAGE 2		
Owner/Permitee:			

Comments: OTHER VIOLATIONS (CONT.)

35 CLEAN/SANITIZE THE ICE SCOOP & ICE SCOOP CONTAINER

43 BATHROOM SHALL BE PROPERLY SUPPLIED WITH SOAP, WARM WATER & PAPER TOWELS AT ALL TIMES. MENS BATHROOM LACKED PAPER TOWELS.

44 ALL PERSONAL ITEMS & PERSONAL FOOD MUST BE STORED AWAY FROM FOOD SERVED/MADE FOR THE PUBLIC IN A DESIGNATED AREA. OBSERVED PERSONAL ITEMS & FOOD CO-MINGLED WITH OTHER FOOD ITEMS & UTENSILS.

45 THE WALLS & FLOORS SHALL BE KEPT CLEAN & SANITIZED REGULARLY. THE FLOORS & MANY WALLS WERE VERY GRIMY/DIRTY & COVERED WITH DEBRIS. REPEAT VIOLATION!!

Received By:	X M. D. H.	REHS:	A. D.
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