## FOOD FACILITY INSPECTION REPORT GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

		247 N	orth Vill	a Avenu	e, Willov	vs, CA 95988 30) 934-6103	Page 1 o	f	
Name of Facility/ DE	(330) 73	(530) 934-6102 FAX (530) 934-6103			Inspection Date:				
Salvagno's Coffee House & Eatera							5/3/6		
Address:							Reinspection Date (on or after):		
730 CT St, OMAND, GAGS					3		(Reinspections are subject to fees)		
Owner/Permitee:			I	Phone No.:			Inspection Time: Permit Exp. Date:		
Terme Som				863-4414			3:10 PM		
Certified Food Handler:							Certificate Expiration Date:		
1 en le	_ ( \						(Certificate expires five years after it is is	ssued)	
	tine Inspe	ection					Other:		
Applicable Law CALIFO	MNIA KEI	ALL FOOD CODE ( Calcode), Beginning wil	in section	113700, 0	Janyorma	Health and Safety Code	(See reverse side of sheet for summary)		
In = In complia		I/A = Not Applicable $N/O = Not Obs$			Major vio	olation Out = Items	s not in compliance $COS = Correct$		_
In		Critical Risk Factors for Disease	Maj	Out	COS	24 Person in charge	e present and performs duties	Out	COS
In		nmunicable disease restrictions					ness and hair restraints	1	
In N/O		charge of eyes, nose, mouth				26. Approved thawi			
In N/O	Eating, tasting, drinking, tobacco use     Hands clean & properly washed, glove use					27. Food separated			
In N/O	6. Handwashing facilities available				+		ing fruits and vegetables substances properly identified, stored and used		
In N/A N/O				×			od storage, 31. Self service, 32. Dabeled		
In (N/A)				1			food contact surfaces clean		
In N/A N/O 9. Proper cooling methods							hing facilities maintained, test strips		
In N/A N/O 10. Proper cooking time and temps							ent, utensils, approved, clean good repair		
	5						sils and linens, storage and use		-
In N/A N/O	12. Returned and reservice of food 13. Food safe and unadulterated				-	37. Vending Machin	quate ventilation and lighting		
In N/A N/O	14. Food contact surfaces clean and sanitized						mometers provided and accurate		
In	15. Food from approved source						roperly used and stored		
In N/A N/O 16. Shell stock tags, 17. Gulf Oyster regs							mbing, proper backflow prevention		
In N/A N/O 18. Compliance with HACCP plan							age properly disposed; facilities maintained		
In N/A N/O 19. Advisory for raw/undercooked food In N/A 20. Health care/ School prohibited food							s clean, vermin proof; personal items separate		
	In 21. Hot & cold water. Temp: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						d ceilings maintained and clean	X	$\vdash$
In )							oved living or sleeping quarters		
In							Signs posted; Permit & inspection report available		
					48. Plan Review Required				
[				4.4				***************************************	
No PHF [ ]									
°F Food	- 2	Location		°F		Food	Location		
46 Watern	ellar	1-Dow uporght loo	les						
39 Milk		undersountes							
1000				+	-				
40 300		10p at the							
Comments:	2501	ly hazardous los	1	24	/aLa	125°F	= w of Lelan 41	07	
Maria Porce	real	Dada all	01	100	-	1	- ny below Ti	/	
FIERSUNC	Cu	+ watermellar	Ut.	76		in une-d	sor worder cool	es.	-
) Label ho	neu	sticks with pr	ode	net	nan	ue, facil	ity name & NOT	t we	ight
Stare in	nea	it pil Saules	an	6	Ac	6" above	for in prop	wer	0
Mainta	in	dows to fail	+12	1	ose	1	ovent vermin	en	tra.
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Received By				0000000	EHS.				