FOOD FACILITY INSPECTION REPORT

GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT 225 N. Tehama Street, Willows, CA 95988 Phone (520) 024 6102 FAV (520) 024 6102

Page 1 of

_			Phone (:	530) 93	34-6102	FAX (53	30) 934-6103			1		
Name of Facility/ DBA: Inspection Date:												
BIG KAHUNA TROZEN YOGURT							3/6/24					
								Reinspection Date (on or after):				
Address: 156 E. WALKER ST, ORLAND 95963 Owner/Permitee: Phone No.:								NEXT INSPECTION (Reinspections are subject to fies)				
Owner/Permitee: Phone No.:							3 (47)	Inspection Time: Permit Exp. Date:				
Owner/Permitee:					Thone No							
KOEL GRATES								3:00				
Certif	ied Food Handle							Certificate Expiration Date	e:			
-	- 40 ME	ci	IRRENT		·			(Certificate expires five years after it is issued)				
Servic	e: 💆 Rout	ine Inspec	ction					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												
-	In = In compliance N/A = Not Applicable N/O = Not Obse				Out	COS	lation Out = Items	Out COS				
			onstration of knowledge	Maj	×	005	24. Person in charge	. Person in charge present and performs duties			003	
R					1			ness and hair restraints				
In	N/O 3. Discharge of eyes, nose, mouth						26. Approved thawi	ng methods used				
The	N/O						27. Food separated:					
(In)	N/O 5. Hands clean & properly washed, glove use			_			28. Washing fruits a					
In In				-	-	1		es properly identified, stored and used 1. Self service, 32. Labeled				
							30. Food storage, 3					
In								acilities maintained, test strips				
	N/O 10. Proper cooking time and temps							nsils, approved, clean good repair				
In	n N/O 11. Reheating temperature for hot holding						9	nsils and linens, storage and use				
In	N/A N/O 12. Returned and reservice of food						37. Vending Machin					
In In					-	-	38. Adequate ventil	ation and lighting provided and accurate				
In					+	1		properly used and stored				
								er backflow prevention				
								rly disposed; facilities maintained				
	Solly							supplied, properly constructed, clean				
	In N/A 20. Health care/ School prohibited food							vermin proof; personal items				
	In 21. Hot & cold water. Temp: 20°F			-				d ceilings maintained and cle	an		-	
(In 22. Wastewater properly disposed 23. No rodents, insects, birds, anim							Q	l living or sleeping quarters ermit & inspection report available				
CIII)	25. No fodents, fiscus, diffusis						48. Plan Review Re					
No PHF []												
oF.	Food Location			°F Food			Food	Location				
-	3/00.00											
40	40 4000		7 - DOOR TRUE FRIPGE									
	FILE		FEIRAE			1						
1												
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Comments:												
CRITICAL VIOLATION												
DOBIAIN THE TOOD SAFETY MANAGER CERTIFICATE												
ASAP THIS WAS DUT OF COMPLIANCE LAST INSPECTION												
SO A RE-INSPECTION FEE WILL APPLY.												
							ATTONS	(
34	Pron	10	THE BATHROOM						Pas	115		
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Received By: REHS: PRESS F												