TRINITY COUNTY DIVISION OF ENVIRONMENTAL HEALTH FOOD PROGRAM OFFICIAL INSPECTION REPORT

FUOD PROGRAM OFFICIAL INSPECTION REPORT									
	(montes) Schell DATE 4-17-2029								
ADDRESS			RECHECK DATE						
OWNER/OPERATOR			SITE#						
MAILING ADDRESS			CORRECT MAJOR VIOLATIONS BY:						
FOOD CERT KITH (CIL)			CORRECT MINOR VIOLATIONS BY:						
10/20/2000									
In = In Compliance N/O = Not Observed N/A = Not Applicable OUT = Out of Compliance COS = Corrected On-Site MAJ = Major Violation									
IN O N/A DEMONSTRATION OF KNOWLEDGE COS MAJ	OUT	IN	N/O	N/A	PROTECTION FROM CONTAMINATION	COS MAJ	OUT		
1. Demonstration of knowledge; food safety certification 9/18/2014			∇		12. Proper procedures followed for returned and re-service of food				
EMPLOYEE HEALTH & HYGIENIC PRACTICES					13. Food contact surfaces: clean and sanitized		<u> </u>		
2. Communicable disease; reporting, restrictions & exclusions		FOOD FROM APPROVED SOURCES							
3. No discharge from eyes, nose, and mouth		XI			14. Food obtained from approved source				
4. Proper eating, tasting, drinking or tobacco use	Í				15. Shelf stock with completed tags, in good condition, properly stored/displayed				
5. Hands clean and property washed; gloves used				X	16. Compliance with Guif Oyster Regulations				
property 6. Adequate handwashing facilities supplied &	-			/\			<u> </u>		
X accessible		-			SPECIAL PROCEDURES	. y '			
TIME AND TEMPERATURE RELATIONSHIPS				X	17. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan				
7. Proper hot and cold holding temperatures		\dashv		\overline{V}	18. Consumer advisory provided for raw or		1		
8. Time as a public health control: Proper				Δ	undercooked foods 20. Licensed health care facilities/ public &				
procedures & records	2	X			private schools; prohibited foods not offered		1		
9. Proper cooling methods					WATER & WASTE WATER	<u>``</u>			
11 10.Proper cooking time & temperatures		X			21. Hot and cold water available Temp				
11.Proper reheating procedures for hot holding		X 2-1			LIQUID WASTE DISPOSAL				
213, 10.4.4.4 3/19, 40, 136.6, 55.4	/	Δ			22. Sewage and wastewater property disposed				
-5.4.39.7					VERMIN				
Blent Sani		X			23. No rodents, insects, birds, or animals				
SUPERVISION /PERSONAL CLEANLINESS	CUT	39 Adequate ventilation and lighting; designated areas, use					CUT		
25. Person in charge present and performs duties				neters provided and accurate					
26. Personal cleanliness and hair restraints		41. Wiping cloths: prope							
GENERAL FOOD SAFETY REQUIREMENTS 27. Approved thawing methods used; frozen food maintained frozen.		PHYSICAL FACILITIES 42. Plumbing: Plumbing in good repair, proper backflow devices					1		
28. Food separated and protected		43. Garbage and refuse properly disposed; facilities maintained							
29. Fruits and vegetables washed as required.	4	44. To	oilet fac	ilities:	property constructed, supplied, cleaned				
30. Toxic substances properly identified, stored, used		45. P	remise	s; perso	onal/cleaning items; vermin-proofing				
FOOD STORAGE/ DISPLAY/ SERVICE 31. Food properly stored; food storage containers identified			PERMANENT FOOD FACILITIES 46. Floor, walls and ceilings: properly built, maintained in good repair, and clean						
32. Consumer self-service facilities properly constructed and maintained					private homes/ living or sleeping quarters				
33. Food property labeled & honestly presented		SIGNS, MISC. REQUIREMENTS & ENFORCEMENT							
EQUIPMENT/ UTENSILS/ LINENS 34. Nonfood contact surfaces clean and in good repair.					ast inspection report available				
			Plan review required for new or remodel construction Permits Available						
36. Equipment/ Utensils (oproved; installed properly, clean; good repair, capacity					of unsanitary equipment or food				
37. Equipment, utensils and linens: Properly stored and used		52. Permit Suspension			on				
38. Vending machines OBSERVATIONS AND CORRECTIVE ACTIONS: OPORT POWITH KITCH CONCORD (PSP) Make Sure to									
purkaging Till chell about the new ment cutter according and									
							3 - 4		
reinspections unless an acceptable corrective time schedule has been submitted and approved by this									
Department. If, for any reasons beyond your control, you ENVIRONME	ENVIRONMENTAL			HEALTH DECENTED DY					
scheduled time, call this office prior to the inspection day.	61 AIRPORT RD				RECEIVED WIT				
	P.O. BOX 476 WEAVERVILLE, CA 96093			۱ ۲	<u> </u>				
	(530) 623-1459				Page 1 of				