

**TRINITY COUNTY  
DIVISION OF ENVIRONMENTAL HEALTH  
FOOD PROGRAM OFFICIAL INSPECTION REPORT**

DBA/NAME <i>Trinity, Gary elementary school</i>		DATE <i>4-12-2020</i>
ADDRESS		RECHECK DATE
OWNER/OPERATOR		SITE #
MAILING ADDRESS		CORRECT MAJOR VIOLATIONS BY:
FOOD CERT <i>Cassandra Miggall</i>	EXP <i>4-23-2026</i>	CORRECT MINOR VIOLATIONS BY:

In = In Compliance    N/O = Not Observed    N/A = Not Applicable    OUT = Out of Compliance    COS = Corrected On-Site    MAJ = Major Violation

IN	N/O	N/A	DEMONSTRATION OF KNOWLEDGE	COS	MAJ	OUT	IN	N/O	N/A	PROTECTION FROM CONTAMINATION	COS	MAJ	OUT	
<input checked="" type="checkbox"/>			1. Demonstration of knowledge; food safety certification 9/18/2014					<input checked="" type="checkbox"/>		12. Proper procedures followed for returned and re-service of food				
<b>EMPLOYEE HEALTH &amp; HYGIENIC PRACTICES</b>							<input checked="" type="checkbox"/>			<b>FOOD FROM APPROVED SOURCES</b>				
		<input checked="" type="checkbox"/>	2. Communicable disease; reporting, restrictions & exclusions				<input checked="" type="checkbox"/>			14. Food obtained from approved source				
<input checked="" type="checkbox"/>			3. No discharge from eyes, nose, and mouth				<input checked="" type="checkbox"/>			15. Shelf stock with completed tags, in good condition, properly stored/displayed				
	<input checked="" type="checkbox"/>		4. Proper eating, tasting, drinking or tobacco use				<input checked="" type="checkbox"/>			16. Compliance with Gulf Oyster Regulations				
<input checked="" type="checkbox"/>			5. Hands clean and properly washed; gloves used properly					<input checked="" type="checkbox"/>		<b>SPECIAL PROCEDURES</b>				
<input checked="" type="checkbox"/>			6. Adequate handwashing facilities supplied & accessible					<input checked="" type="checkbox"/>		17. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan				
<b>TIME AND TEMPERATURE RELATIONSHIPS</b>									<input checked="" type="checkbox"/>	18. Consumer advisory provided for raw or undercooked foods				
<input checked="" type="checkbox"/>			7. Proper hot and cold holding temperatures				<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	20. Licensed health care facilities/ public & private schools; prohibited foods not offered				
	<input checked="" type="checkbox"/>		8. Time as a public health control: Proper procedures & records				<input checked="" type="checkbox"/>			<b>WATER &amp; WASTE WATER</b>				
	<input checked="" type="checkbox"/>		9. Proper cooling methods				<input checked="" type="checkbox"/>			21. Hot and cold water available Temp				
<input checked="" type="checkbox"/>			10. Proper cooking time & temperatures				<input checked="" type="checkbox"/>			<b>LIQUID WASTE DISPOSAL</b>				
	<input checked="" type="checkbox"/>		11. Proper reheating procedures for hot holding				<input checked="" type="checkbox"/>			22. Sewage and wastewater properly disposed				
<b>34.3, 11.2, 164.1, 196.6</b>							<input checked="" type="checkbox"/>			<b>VERMIN</b>				
<b>Bleach Sani</b>							<input checked="" type="checkbox"/>			23. No rodents, insects, birds, or animals				
<b>SUPERVISION /PERSONAL CLEANLINESS</b>														<b>OUT</b>
25. Person in charge present and performs duties										<b>39.. Adequate ventilation and lighting; designated areas, use</b>				
26. Personal cleanliness and hair restraints										<b>40. Thermometers provided and accurate</b>				
<b>GENERAL FOOD SAFETY REQUIREMENTS</b>										<b>41. Wiping cloths; properly used and stored</b>				
27. Approved thawing methods used; frozen food maintained frozen.										<b>PHYSICAL FACILITIES</b>				
28. Food separated and protected										42. Plumbing: Plumbing in good repair, proper backflow devices				
29. Fruits and vegetables washed as required.										43. Garbage and refuse properly disposed; facilities maintained				
30. Toxic substances properly identified, stored, used										44. Toilet facilities: properly constructed, supplied, cleaned				
<b>FOOD STORAGE/ DISPLAY/ SERVICE</b>										45. Premises; personal/cleaning items; vermin-proofing				
31. Food properly stored; food storage containers identified										<b>PERMANENT FOOD FACILITIES</b>				
32. Consumer self-service facilities properly constructed and maintained										46. Floor, walls and ceilings: properly built, maintained in good repair, and clean				
33. Food properly labeled & honestly presented										47. No unapproved private homes/ living or sleeping quarters				
<b>EQUIPMENT/ UTENSILS/ LINENS</b>										<b>SIGNS, MISC. REQUIREMENTS &amp; ENFORCEMENT</b>				
34. Nonfood contact surfaces clean and in good repair.										48. Signs posted; last inspection report available				
35. Warewashing facilities: Adequate, maintained, properly used, test strips available										49. Plan review required for new or remodel construction				
36. Equipment/ Utensils Approved; installed properly, clean; good repair, capacity										50. Permits Available				
37. Equipment, utensils and linens: Properly stored and used										51. Impoundment of unsanitary equipment or food				
38. Vending machines										52. Permit Suspension				
										53. Other				

**OBSERVATIONS AND CORRECTIVE ACTIONS:** *Everything was amazing, great work! When you begin to install the handwash sink, reach out to us first so we can check the specifications of the equipment. Thank you!!*

Reinspection fees will be charged for all subsequent reinspections unless an acceptable corrective time schedule has been submitted and approved by this Department. If, for any reasons beyond your control, you cannot correct the indicted violations by the next scheduled time, call this office prior to the inspection day.  
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**TRINITY COUNTY  
ENVIRONMENTAL HEALTH  
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P.O. BOX 476  
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(530) 623-1459**

R.E.H.S. *[Signature]*  
RECEIVED BY: *[Signature]*  
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