



Food Program Official Inspection Report

Siskiyou County Community Development Department
 Environmental Health Division
 806 S. Main Street
 Yreka, California 96097
 phone: (530) 841-2100, fax: (530) 841-4076

Facility Name: Say Cheese Pizza	Permit # 000401
Address: 304 Maple St., Mount Shasta, CA	
Permit Holder: Steven Mapes	Permit To Operate: <input checked="" type="radio"/> Valid <input type="radio"/> Not Valid
Phone: 530-926-2821	E-mail: smapes007@gmail.com
Food Safety Certified Employee: Steven Mapes	Expiration Date: 09/2028

		MAJ	OUT	COS		
					The marked items represent Health Code violations and must be corrected as follows:	
Protection Time/ Temp.	1		X		<p style="text-align: center; margin: 0;">ROUTINE INSPECTION CONDUCTED THIS DATE</p> <p>1) Observed cold foods measuring 45F in the deli-prep cooler. Observed multiple cold foods in salad bar measuring 46F-49F. Hold all cold foods at 41F or below and dairy products at 45F or below. Correct immediately.</p> <p>13) Observed numerous used wash cloths on food prep counters. Store wash cloths in sani-bucket when not in use. Corrected during inspection.</p> <p>14) Observed damaged or broken seals around the doors in the reach-in freezer. Maintain equipment to be in good repair. Repair within 90 days.</p> <p>14) Observed a damaged kick board to a deli-prep cooler, exposing buildup of dust on the ventilation system. Ensure this unit is kept clean, fully operative, and in good repair. Repair within 90 days.</p> <p>14) Observed bare wood shelving throughout the food preparation area. Ensure all food contact surfaces are smooth, easily cleanable, nonabsorbent, and durable. Correct immediately.</p> <p>29) Observed paint peeling to the finishes on the floors throughout the kitchen. Maintain floors to be smooth, cleanable, nonabsorbent, and durable in construction. Repair within 90 days.</p> <p>30) Observed a panel on the wall missing behind the warewasher, exposing pipes and insulation. Ensure food is protected and free from adulteration. Repair asap.</p>	
	2					
	3					
	Food Storage	4				
		5				
		6				
		7				
Uten./Equip.	8					
	9					
	10					
	11					
Employee	12					
	13		X	X		
	14		X			
Water	15					
	16					
	17					
	18					
Waste	19					
	20					
	21					
	22					
Vermin	23					
	24					
Facilities	25					
	26					
	27					
	28					
	29		X			
	30		X			
	31					
Misc.	32					
	33					
	34					
	35					
	36					

MAJ = Major violation OUT = Out of compliance COS = Corrected on-site	
Received By (Print): Steven Mapes	Received by (Signature): _____ Date: 11/28/2023
REHS (Print): Chalyn Dewey	REHS (Signature): _____ Phone: 530-841-2112

Facility Name: Say Cheese Pizza

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Received by (Signature):

Date:
11/28/2023

REHS (Print):
Chalyn Dewey

REHS (Signature):

Phone:
530-841-2112

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