

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: Rays Food Place Permit # 000384										
Addres	ss:	175 N Weed B	lvd,	Wee	d CA	x 96094				
Permit Holder: C & K Markets Permit To Operate: Not Valid Not Valid										
Phone		530-938-4619				E-mail:				
Food S	Safe	ty Certified Employ	ee:	4my	Linfo	ot	Expiration	Date: 07/2027		
			MAJ	The marked items represent Health Code violations and mu	st be corrected					
Protection Time/ Temp.	1	Food Temp.				ROUTINE INSPECTION CONDUCTED O	N THIS DAT	E		
	2	Prep./ Service								
	3	Storage/ Disp.				30) Observed the walls in the meat processing section to have dama				
	4	Frozen Food				rust and food debris on the wall adjacent to the sink. Repair the walls with an approve or order to maintain smooth, durable, non-absorbent and cleanable surfaces. Repair of				
	5	Pure Food				within the next 60 days.	nanc, non-absorbent and deanable surfaces. Repair of replace			
	6	Reused Food				****				
	7	Transportation				14) Observed shipping tape on the floor of the walk-in freezer. Ma		oors to be smooth,		
Food Storage	8	Storage Fac.				durable, cleanable and non-absorbent. Remove shipping tape immedia	nmediately.	∍ly.		
	9	Refrig. Units				14) Observed tape was being used to secure the sealer part of				
	10	Thermometer				serviceable and in good repair at all times. Repair or replace with				
-000		Hazardous Mat.						•		
ш	12	Spoils				 14) Observed bare wood shelving inside the walk-in produce refrigeration unit. Ensure is surface to be smooth, durable, non-absorbent, and easily cleanable. Repair or replace next 60 days. 29) Observe bare wood flooring in the walk-in freezer unit. Ensure these surface to be significant durable, non-absorbent, and easily cleanable. Repair or replace within the next 60 days. 				
.dir	13	Wash/ Sanitize					or replace within the			
Uten./Equip.	14	Equip. Condition		X						
ten.		Utensil Condition					ire these surf	surface to be smooth,		
n	16	Storage					ext 60 days.			
9		Handwashing								
Employee		Employee Hygiene								
Emp		Employee Habits								
		Food Cert./ Card								
Water	_	Water								
		Cross Con.								
Waste		Liquid Waste								
		Refuse								
/ermin	_	Rodents/ Insects								
γ		Animal/ Fowl								
		Ventilation								
ies		Doors								
Facilities		Floors		X						
Ę,		Walls - Ceilings		X						
		Toilet Fac.								
		Janitorial Fac.	Н							
		Lighting								
Misc.		Clothing - Linen								
		Signs								
MA.I –		Misc. or violation ()UT -	Out	of com	apliance COS = Corrected on-site				
Received By (Print): Received by (Signature): Date:										
Bob Marks 3/22/2024										
REHS (Print): REHS (Signature): Phone: 530-841-2117										

Facility Name:	Rays Food Place	
	The marked items represent Health Code violations and r	nust be corrected as follows:
Received By (Print):	Received by (Signature):	Date:
Bc	bb Marks	3/22/2024
REHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

Facility Name:	Rays Food Place	
	The marked items represent Health Code violations and must be corrected as	follows:
Received By (Print):	Received by (Signature):	Date:
REHS (Print):	Marks REHS (Signature):	3/22/2024 Phone:

530-841-2117

Alexa Roche

Facility Name:	Rays Food Place		
	The marked items rep	present Health Code violations and must be	corrected as follows:
Received By (Print): Bob) Marks	Received by (Signature):	Date: 3/22/2024
REHS (Print): Alexa Ro	oche	REHS (Signature):	Phone: 530-841-2117