



### 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: <b>Bella Art Works &amp; Ice Cream</b>	Permit # <b>000107</b>
Address: <b>117 W Miner St., Yreka, CA 96097</b>	
Permit Holder: <b>Talya Nicholson</b>	Permit To Operate: <input checked="" type="radio"/> Valid <input type="radio"/> Not Valid
Phone: <b>530-842-5411</b>	E-mail: <b>bellaartworks@hotmail.com</b>
Food Safety Certified Employee: <b>Talya Nicholson</b>	Expiration Date: <b>06/2027</b>

		MAJ	OUT	COS	
					The marked items represent Health Code violations and must be corrected as follows:
Protection Time/Temp.	1		X	X	<p style="text-align: center; margin-bottom: 10px;"><b>ROUTINE INSPECTION CONDUCTED THIS DATE</b></p> <p>1) Observed chili and cheese at 118F at hot holders. Ensure hot foods are held at 135F or above. Voluntarily discarded.</p> <p>2) Observed raw steaks store next to ready-to-eat foods in the box freezer. Store ready-to-eat foods above raw foods. Correct immediately.</p> <p>14) Observed packaging tape on the surfaces of the hot food warmer and ice machine. Maintain surfaces in food prep area as to be easily cleanable, durable, nonabsorbent and durable. Remove tape and clean and sanitize immediately.</p> <p><b>NOTE:</b></p> <p>1) Provided "Facility Inspection Notice" form.</p> <p>2) Ensure all new equipment are preapproved by the department prior to purchase or installation.</p>
	2		X		
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Food Storage	8				
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	10				
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Uten./Equip.	12				
	13				
	14				
Employee	15				
	16				
	17				
Water	18				
	19				
Waste	20				
	21				
Vermin	22				
	23				
Facilities	24				
	25				
	26				
	27				
	28				
	29				
Misc.	30				
	31				
	32				
	33				
	34				
	35				
	36				

MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site	
Received By (Print): <b>Talya Nicholson</b>	Received by (Signature): _____ Date: <b>08/28/2024</b>
REHS (Print): <b>Chalyn Dewey</b>	REHS (Signature): _____ Phone: <b>530-841-2112</b>

**Facility Name:** Bella Art Works & Ice Cream

The marked items represent Health Code violations and must be corrected as follows:

[Empty area for listing health code violations and correction details]

Received By (Print): Talya Nicholson	Received by (Signature):	Date: 08/28/2024
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REHS (Print): Chalyn Dewey	REHS (Signature):	Phone: 530-841-2112
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Received by (Signature):

Date:  
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REHS (Signature):

Phone:  
530-841-2112