## Food Program Official Inspection Report



Siskiyou County Community Development Department Environmental Health Division 806 S. Main Street Yreka, California 96097

						priorie: (530) 641-2100, fax. (530) 641-4076	100			
Facility Name: MT. SHASTA ELKS LODGE						DDGE	Permit # 000346			
Addres	SS:	326 N MOUN	T SH	IAST	A BI	LVD. MOUNT SHASTA				
Permit Holder: MT. SHASTA ELKS							Permit To Operate:  Valid Not Valid			
Phone		530-926-2138				E-mail: office@mountshastaelks.com				
Food S	Safe	ty Certified Employ	ree: F	PETE	ER P	APPAS	Expiration Date: 09/2025			
			_	OUT		The marked items represent Health Code violations and must				
o.	1	Food Temp.								
Protection Time/ Temp.	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DAY				
L/əı	3	Storage/ Disp.								
Ţ	4	Frozen Food								
tion	5	Pure Food				This facility is currently dismantled and getting prepared for a remodel. The remodel is				
otec	6	Reused Food				proposed for the kitchen area. Facility members are still utilizing the bar area. Please ensure to submit plans with a plan check application before any new construction.				
P	7	Transportation								
m	8	Storage Fac.								
rage	9	Refrig. Units		8		Inspection of the bar area is Satisfactory at Present Time.				
Food Storage	10	Thermometer			0	2000 € 17 3 125 1940 - 145 1950 1950 1950 1950 1950 1950 1950 195				
poo	11	Hazardous Mat.								
ш	12	Spoils								
ij.	13	Wash/ Sanitize		1 m						
Uten./Equip.	14	Equip. Condition				]				
ten./	15	Utensil Condition								
Ď	16	Storage								
Ф	17	Handwashing								
Employee	18	Employee Hygiene								
-m		Employee Habits			,					
	20	Food Cert./ Card								
Water		Water								
		Cross Con.								
Waste	Ov. 10	Liquid Waste								
>		Refuse								
Vermin		Rodents/ Insects	_							
Ne Ne		Animal/ Fowl			8					
		Ventilation								
es	8 8	Doors	Н		8					
Facilities		Floors	,							
T,		Walls - Ceilings								
		Toilet Fac.	Н							
		Janitorial Fac.			7					
		Lighting Clothing - Linen								
Misc.										
2		Signs								
MAJ =		Misc. or violation C	UT =	Out	of com	pliance COS = Corrected on-site				
Receive					-2.1	Received by (Signature):	Date: 12/10/2024			
REHS (Print): Rick Florendo						REHS (Signature):	Phone: 530-841-2112			

Page 1 Last modified 4/12/2023

Facility Name: MT. SHASTA ELK	S LODGE	
The marked items	represent Health Code violations and must be co	rrected as follows:
Received By (Print):	Received by (Signature):	Date:
Kathy Johnson		12/10/2024
REHS (Print):	REHS (Signature):	Phone:

530-841-2112

Rick Florendo

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REHS (Print):	REHS (Signature):	Phone:
Rick Florendo		530-841-2112

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Kathy John		12/10/2024
REHS (Print)	REHS (Signature):	Phone:

530-841-2112

Rick Florendo