## 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	/ Na	me: Weed Ele	menta	ary				Permit # 0004	176
Addres	20.	575 White Ave	(5)(8)(8)(1/2)(1/2)	400000	A 96	6094		E. 25-200	
Permit			20.					Permit To Oper	ate: Not Valid
Phone	: [	530-938-6150				E	-mail: msharp@weedelem.k12.ca.us		-
Food S		ty Certified Employ	/ee: N	/aria	Sha	rn		Expiration Date	01/2025
		600 0	-22	ОПТ		, one o	ed items represent Health Code violations and mu	st be corrected as fo	
Protection Time/ Temp.	1	Food Temp.	IVIAU	001	003	THE HIGH	ROUTINE INSPECTION CONDUCTED	National Control of the Control of t	ollows.
	2	Prep./ Service					ROUTINE INSPECTION CONDUCTED	ON THIS DATE	
		Storage/ Disp.					TTIME		
	4	Frozen Food							
	5	Pure Food							
	6	Reused Food							
	7	Transportation							
Food Storage	8	Storage Fac.							
	9	Refrig. Units							
	10	Thermometer							
900	11	Hazardous Mat.							
ш	12	Spoils							
ij.	13	Wash/ Sanitize							
Uten./Equip.	14	Equip. Condition							
ten./	15	Utensil Condition							
5	16	Storage							
Φ	17	Handwashing							
Employee	18	Employee Hygiene							
dm:	19	Employee Habits							
	20	Food Cert./ Card							
Water		Water							
Š	22	Cross Con.							
Waste		Liquid Waste							
Š	24	Refuse							
Vermin		Rodents/ Insects	$\sqcup$						
\ \		Animal/ Fowl							
		Ventilation	Ш						
es	1	Doors	$\vdash$						
Facilities	ALC: Y	Floors							
Fa	-	Walls - Ceilings	$\vdash$						
		Toilet Fac.	Н		_				
	-	Janitorial Fac.	Н						
		Lighting		_	_				
Misc.		Clothing - Linen		$\dashv$					
		Signs		_					
MA I –		Misc. or violation (	NIT -	Out of	com	pliance COS = Corr	acted on site		
		v (Print):				Received by	ected on-site (Signature):	Date:	
WALKER STREET		Shanna	Mac	hado	)	2008-2212-000H-032W		12/13/2	2024
REHS (	Print	Alexa Roche	Э			REHS (Sign	ature):	Phone: 530-84	41-2117

Facility Name:	Weed Elementary			
	The marked items re	present Health Code violations and mus	st be corrected as follows:	
Received By (Print):		Received by (Signature):	Date:	
Sh	anna Machado	,	12/13/2024	
REHS (Print): Alexa Ro	che	REHS (Signature):	Phone: 530-841-2117	

Facility Name: We	eed Elementary	
Т	The marked items represent Health Code violations and must be	e corrected as follows:
	•	
Received By (Print):	Received by (Signature):	Date:
	Machado	12/13/2024
EHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

Facility Name:	Weed Elementary		
	The marked items re	present Health Code violations and must be	corrected as follows:
Received By (Print):	ınna Machado	Received by (Signature):	Date: 12/13/2024
REHS (Print): Alexa Ro		REHS (Signature):	Phone: 530-841-2117