

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: Butteville Elementary 000173										
Address: 24512 Edgewood Rd, Weed CA 96094										
Permit	Permit Holder:Permit To Operate:									
Phone	Butteville Elementary Valid Not Valid Phone: 520,028,2255 E-mail: Adrianna traur@k12, ap up									
	Adhanne.treur@k1z.ca.us									
Food	Food Safety Certified Employee: Adrianne Treur Expiration Date: 08/2028									
		-	MAJ	OUT	COS	The marked items represent Health	Code violations and must be corrected as follows:			
Protection Time/ Temp.	1	Food Temp.				ROUTINE INSPECTION	CONDUCTED ON THIS DATE			
	2	Prep./ Service								
	3	Storage/ Disp.								
	4	Frozen Food				SATISFACTORY AT PRESENT TIME				
	5	Pure Food				SATISFACTURY AT PRESENT TIME				
	6	Reused Food								
	7	Transportation								
C	8	Storage Fac.								
Food Storage	9	Refrig. Units								
	10	Thermometer	2							
	_	Hazardous Mat.								
	12	Spoils								
ġ.	13	Wash/ Sanitize								
Uten./Equip.	14	Equip. Condition								
ten.	15	Utensil Condition								
5	16	Storage								
Φ	17	Handwashing								
loye	18	Employee Hygiene								
Employee		Employee Habits								
		Food Cert./ Card								
Water	21	Water	_							
	22	Cross Con.								
Waste		Liquid Waste								
		Refuse								
Vermin	_	Rodents/ Insects								
Ve		Animal/ Fowl								
	27	Ventilation								
es	-	Doors		-						
Facilities	_	Floors								
ц	-	Walls - Ceilings								
		Toilet Fac.								
	32	Janitorial Fac.	_							
 		Lighting	-	\vdash	_					
Misc.		Clothing - Linen			_					
Σ		Signs		\vdash						
MAL		Misc.		Out of	compliance	COS - Corrocted on site				
			- 100	Out OI	compliance	COS = Corrected on-site Received by (Signature):	Date:			
Received By (Print): Received by (Signature): Date: 1/8/2024										
REHS (Print): REHS (Signature): Phone:										
Alexa Roche 530-841-2117										

Facility Name:	Butteville Elementary			
		esent Health Code violations and r	nust be corrected as follows:	
		x		
Received By (Print):	idaett Paves	Received by (Signature):	Da	ate: 1/8/2024
	idgett Payne	DELIS (Signatura):	וח	
REHS (Print): Alexa Ro	oche	REHS (Signature):	PI	none: 530-841-2117
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	The marked items represent Health C	Code violations and must be corrected as follow	VS:
	κ.		
Received By (Print):	Received b	y (Signature):	Date:
Brid	gett Payne		1/8/2024
REHS (Print):	REHS (Sig	nature):	Phone:
Alexa R	oche		530-841-2117
Page 3			

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REHS (Print):	REHS (Signature):	Phone:
Alexa Ro	oche	530-841-2117