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

Facilit	/ Na	^{me:} Wendys -	Yrek	а			Permit # 001064			
Address: 1803 Fort Jones Rd Yreka 96097										
Permit Holder: Andrew Hennan, Riise Hospitality Group LLC										
Phone	Phone: 530-840-9079 E-mail:									
Food	Food Safety Certified Employee: Nicole Quinn Expiration Date: 07/2029									
				_	The marked items represent Health Code viol					
Protection Time/ Temp.	1	Food Temp.		001	000					
	2	Prep./ Service				COMPLAINT INSPECTION CC	INDUCTED ON THIS DATE			
	3	Storage/ Disp.								
	4	Frozen Food				Complaint was recieved regarding an employ	ee smoking in the food preparation area.			
tion	5	Pure Food				20) Observed a large hale and interthermall half				
	6	Reused Food				30) Observed a large hole cut into the wall beh the dining area large enough for vermin, dust,				
	7	Transportation				Seal up the wall and ensure finishes to be smo				
	8	Storage Fac.				nonabsorbent. Correct as soon as possible.				
rag	9	Refrig. Units								
Food Storage	10	Thermometer				13) Observed 2 buckets of sanitizer with 0 PPM of Quat or chlorine. Effective santii				
000	11	Hazardous Mat.				measures 200 PPM QUAT and 100 PPM for chlorine. Corrected on-site.				
<u> </u>	12	Spoils								
D	13	Wash/ Sanitize	2	Х	X					
Uten./Equip.	14	Equip. Condition								
ten.		Utensil Condition								
5	16	Storage								
9		Handwashing								
loye		Employee Hygiene								
Employee	_	Employee Habits			-					
	10000	Food Cert./ Card	_							
Water	21	Water								
3		Cross Con.	_		-					
Waste	_	Liquid Waste								
		Refuse	-		-					
Vermin		Rodents/ Insects Animal/ Fowl	-							
Ve	2 2		-		0 0					
	27	Ventilation Doors			5					
ties	1 1				6 V					
Facilities	29 30	Floors Walls - Ceilings		V						
Ľ.		Toilet Fac.		X	-					
	32	Janitorial Fac.								
		Lighting	-	-						
Misc.	34	1								
	-	Signs								
	1	Misc.								
MAJ =	= Major violation OUT = Out of com				of com	pliance COS = Corrected on-site				
Receiv	ed B	y (Print): Nicole (Quini	n		Received by (Signature):	Date: 2/11/205			
REHS	(Prin	t): Alexa Roche	Э			REHS (Signature):	Phone: 530-841-2117			

Facility Name:	Wendys - Yreka
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The marked items represent Health Code violations and must be corrected as follows:

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Received By (Print):	Received by (Signature):	Date:
Nicole Quinn		2/11/205
REHS (Print): Alexa Roche	REHS (Signature):	Phone: 530-841-2117

Facility Name:	Wendys - Yreka			
		resent Health Code violations and r	must be corrected as follows:	
	The marked liens repi	esent health code violations and i	nusi de conecieu as ionows.	
Popping Dr. (Drint)		Received by (Signature):		ate:
Received By (Print): Nico	ble Quinn	Necerred by (Signature).	D	2/11/205
REHS (Print): Alexa R	loche	REHS (Signature):	P	none: 530-841-2117
				JJU-041-2117
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Facility Name:				
	Wendys - Yreka			
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		× ·		
Received By (Print):		Received by (Signature):		Date:
Nice	ole Quinn	(Oignature).		2/11/205
REHS (Print):		REHS (Signature):		Phone:
Álexa Ro	oche			530-841-2117