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: Jolley's Club Permit # 000273											
Address: 605 South Main Street, Yreka, CA 96097											
Permit Holder: Steve and Janet Thomas, and Shannon Meyers Permit Holder: Valid Not Valid Not Valid											
Phone: 530-842-6678 E-mail: jthomas5932@sbcglobal.net											
Food Safety Certified Employee: N/A Expiration Date:											
		- Conta was	The marked items represent Health Code violations and must be corrected as follows:								
Protection Time/ Temp.	1	Food Temp.	MAJ	OUT	cos						
	2	Prep./ Service				FOLLOW-UP INSPECTION CONDUCTED THIS DATE					
	3	Storage/ Disp.									
	4	Frozen Food				25) 2nd Notice - Observed rodent droppings on the floors and shelves in the dry storage					
	5	Pure Food				area. Prevent cross contaminating food and surfaces by maintaining facility in a clea					
otec	6	Reused Food				manner at all times. Wash, clean, and sanitize all bottles and floors within 14 days ar					
Pr	7	Transportation			-	continue to rodent proof facility with setting up bait traps, sealing up holes, etc.					
d)	8	Storage Fac.				A reinspection fee will be assessed to future repeat violation.					
rage	9	Refrig. Units	9.5 - 2.0	3		A tempositor fee will be assessed to fatare repeat violation.					
Food Storage	10	Thermometer		8							
poo	11	Hazardous Mat.				NOTE: Facility is only selling prepackaged chips and peanuts to the guests. All frozen					
ш	12	Spoils		3	6	microwavable foods in box freezers are for employees. Air-fryer and microwave are for					
ġ.	13	Wash/ Sanitize		8	2	personal use only. Again if microwavable foods and equipment are used for the consumers/guests, then facility will be ordered to remove equipment and food from					
Uten./Equip.	14	Equip. Condition		3		facility.					
en./	15	Utensil Condition									
5	16	Storage									
æ		Handwashing									
loye	18	Employee Hygiene									
Employee		Employee Habits									
	20	Food Cert./ Card									
Water	CONT. CONT.	Water									
Waste		Liquid Waste									
	-	Refuse									
Vermin	-	Rodents/ Insects		X							
Ve		Animal/ Fowl			0						
	27	Ventilation	ш		ž.						
es	1	Doors			0						
Facilities	- Carrier Co	Floors	Н								
T,		Walls - Ceilings	Н								
	31	Toilet Fac.		_	_						
	32	Janitorial Fac.		9							
		Lighting									
Misc.	-	Clothing - Linen									
	COLUMN TO SERVICE SERV	Signs									
MAJ =	_	Misc. or violation C	UT =	Out o	of com	ppliance COS = Corrected on-site					
Received By (Print): Received by (Signature): Date:											
Janet Thomas 03/03/2025											
REHS (Print): Chalyn Dewey REHS (Signature): Phone: 530-841-2112											

Facility Name: Jolley's Club		
The marked items	represent Health Code violations and must be co	rrected as follows:
Received By (Print):	Received by (Signature):	Date:
Janet Thomas		03/03/2025
REHS (Print):	REHS (Signature):	Phone:
Chalyn Dewey		530-841-2112

Facility Name:	Jolley's Club	
	The marked items represent Health Code violations and must be corrected as follows:	
	k.	
Received By (Print): Jane	Received by (Signature): Da et Thomas	ite: 03/03/2025
REHS (Print): Chalyn I		one: 530-841-2112

Facility Name: Jolley	y's Club	
The	e marked items represent Health Code violations and must be corre	ected as follows:
Received By (Print):	Received by (Signature):	Date:
Janet Tho		03/03/2025
REHS (Print): Chalyn Dewey	REHS (Signature):	Phone: 530-841-2112
5a., 50 0y		000 071 2112