



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: Raley's #247				Permit # 000383	
Address: 1840 Fort Jones Rd., Yreka, CA 96097					
Permit Holder: Raley's				Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid	
Phone: 530-842-4307		E-mail: 247astdir@raleys.com			
Food Safety Certified Employee: Travis Stoltenburg				Expiration Date: 04/2028	

		MAJ	OUT	COS	
Protection Time/ Temp.	1 Food Temp.				<p style="text-align: center;">The marked items represent Health Code violations and must be corrected as follows:</p> <p style="text-align: center;">ROUTINE INSPECTION CONDUCTED THIS DATE</p> <p>2) Observed 57F parfaits and 48F shaker salad cups thawing on the counter at salad prep station. Practice approved safe food thawing methods such as in refrigerator, under cool running water at 70F for no longer than 2hrs, etc. Foods moved to walk-in refrigerator for rapid cooling.</p> <p>3) Observed food in crates stored on the ground at back warehouse in front of walk-in refrigerator. Store all foods at least 6" off floor and in a manner not exposed to splash, dust, or other forms of contamination. Correct immediately.</p> <p>14) 2nd Notice - Observed excessive build-up of food inside, along door tracks, and hard to reach places at all display cases in the deli prep area. Observed food build-up on the meat slicer and surrounding counter. Observed food buildup at (doordash) beverage cabinet at bakery area. Prevent harborage of pathogens by ensuring food contact equipment are cleaned and sanitized, daily. Wash, clean and sanitize immediately.</p> <p>14) Observed excessive buildup of grease and food at cabinet below hot warmer at deli area. Ensure equipment is clean and fully serviceable at all times. Deep clean ASAP.</p> <p>14) Observed the finishes to bread slicer at bakery station and work station table at meat department chipping. Prevent cross contamination by maintaining equipment to be easily cleanable, smooth, nonabsorbent, and durable. If possible, refinish equipment within 90 days or replace with ANSI certified unit if no longer serviceable. Send manufacture spec sheet for preapproval prior to purchase and installation.</p> <p>29) 2nd Notice - Observed excessive buildup of grease, food, and dust on floors and hard-to-reach places (below counters, at wall and floor junctions) throughout all departments. Maintain floors in food prep areas in a cleanly manner, and is cleaned daily. Wash, clean and sanitize immediately.</p> <p>29) Observed broken tiles on the floors behind the fryer station. Observed excessive grease pooling in this damaged area. Maintain floors to be easily cleanable, smooth, durable in construction, and smooth. Repair or correct within 90 days.</p> <p>30) Observed buildup of food on the wall at salad prep station. Maintain all walls in food prep area in a clean manner. Wash, clean, and sanitize immediately.</p> <p style="text-align: center;">A REINSPECTION FEE WILL BE ASSESSED TO REPEAT NON-COMPLIANCE.</p>
	2 Prep./ Service		X	X	
	3 Storage/ Disp.		X		
	4 Frozen Food				
	5 Pure Food				
	6 Reused Food				
	7 Transportation				
Food Storage	8 Storage Fac.				
	9 Refrig. Units				
	10 Thermometer				
	11 Hazardous Mat.				
Uten./Equip.	12 Spoils				
	13 Wash/ Sanitize				
	14 Equip. Condition		X		
Employee	15 Utensil Condition				
	16 Storage				
	17 Handwashing				
Water	18 Employee Hygiene				
	19 Employee Habits				
	20 Food Cert./ Card				
Waste	21 Water				
	22 Cross Con.				
Vermin	23 Liquid Waste				
	24 Refuse				
Facilities	25 Rodents/ Insects				
	26 Animal/ Fowl				
	27 Ventilation				
	28 Doors				
	29 Floors		X		
	30 Walls - Ceilings		X		
	31 Toilet Fac.				
Misc.	32 Janitorial Fac.				
	33 Lighting				
	34 Clothing - Linen				
	35 Signs				
	36 Misc.				

MAJ = Major violation OUT = Out of compliance COS = Corrected on-site	
Received By (Print): Travis Stoltenburg	Received by (Signature): _____ Date: 03/05/2025
REHS (Print): Chalyn Dewey	REHS (Signature): _____ Phone: 530-841-2112

Facility Name: Raley's #247

The marked items represent Health Code violations and must be corrected as follows:

Received By (Print): Travis Stoltenburg	Received by (Signature):	Date: 03/05/2025
--	--------------------------	---------------------

REHS (Print): Chalyn Dewey	REHS (Signature):	Phone: 530-841-2112
-------------------------------	-------------------	------------------------

Facility Name: Raley's #247

The marked items represent Health Code violations and must be corrected as follows:

Received By (Print): Travis Stoltenburg	Received by (Signature):	Date: 03/05/2025
--	--------------------------	---------------------

REHS (Print): Chalyn Dewey	REHS (Signature):	Phone: 530-841-2112
-------------------------------	-------------------	------------------------

Facility Name: Raley's #247

The marked items represent Health Code violations and must be corrected as follows:

Received By (Print): Travis Stoltenburg	Received by (Signature):	Date: 03/05/2025
--	--------------------------	---------------------

REHS (Print): Chalyn Dewey	REHS (Signature):	Phone: 530-841-2112
-------------------------------	-------------------	------------------------