| | | CALIFORN | 12:00 52 | | | Food Program Official Inspection Report SISKIYOU COUNTY COMMUNITY DEVELOPMENT DEPARTMENT Environmental Health Division 806 S. Main Street Yreka, California 96097 ph: (530) 841-2100, fax: (530) 841-4076 | | |
|---|----|-------------------------------------|-----------|----------|--|---|--------------------------|-------|
| Facility Name: Selad Elementary School CMHC | | | | | | | | 22 |
| Address: HWIN 96. SEIGO CO. | | | | | | | | |
| Permit Holder: Permit To Operate: | | | | | | | | |
| Sciad Elementary School Dvalid DNot Valid | | | | | | | | |
| Phone: 530-496-3308 E-mail: | | | | | | | | |
| Food Safety Certified Employee: Savana Oliver Expiration Date | | | | | | | | |
| - | | | MAJ | OUT | | The marked items represent Health Code violations and n | nust be corrected as fol | lows: |
| Protection Time/ Temp. | 1 | Food Temp. | | | | | | |
| | 2 | Prep./ Service | | | | Routine inspec Conducted this date | TION | |
| | 3 | Storage/ Disp. | | | | | | |
| | 4 | Frozen Food | | | | CONducted Thisdate | | |
| | 5 | Pure Food | | 3 | | | | |
| | 6 | Reused Food | | | | | | |
| | 7 | Transportation | | | | C C deal al m | a mit | |
| d Storage | 8 | Storage Fac. | | | | Satusfactory at pr | eser | |
| | 9 | Refrig. Units | | | | Turne | | |
| | 10 | Thermometer | | | | 1/1/12 | | |
| Food | 11 | Hazardous Mat. | | | | | | |
| | + | Spoils | | | | | | |
| Uten./Equip. | | Wash/ Sanitize | | | | | | |
| | - | Equip. Condition | | L | | | | |
| ten. | - | Utensil Condition | - | <u> </u> | | | | |
| | - | Storage | | - | | | | |
| ş | _ | Handwashing | - | | | | | |
| Vermir Waste Water Employee | - | Employee Hygiene Employee Habits | 1 | | | | | |
| | - | Food Cert./ Card | - | <u> </u> | | | | |
| | - | Water | | - | | | | |
| | - | Cross Con. | <u> </u> | - | | | | |
| | - | Liquid Waste | | | | in the second | | |
| | | Refuse | | \vdash | | | | |
| | + | Rodents/ Insects | \square | | | and the second | | |
| | - | Animal/ Fowl | | | | | | |
| | + | Ventilation | | | | | | |
| Facilities | - | Doors | | | | | | |
| | 29 | Floors | | | | | | |
| | 30 | Walls - Ceilings | | | | | | |
| | 31 | Toilet Fac. | | | | | | |
| | 32 | Janitorial Fac. | | | | | | |
| | 33 | Lighting | | | | | | |
| Misc. | 34 | Clothing - Linen | | | | | | |
| | 35 | Signs | | 1.5 | | | | |
| | | Misc. | | | | | | |
| MAJ = Major violation OUT = Out of compliance COS = Corrected on-site | | | | | | | | |
| Received By (Print): Date: 4/02/25 REHS (Print): David Jackson REHS (Signature): Phone: 530-841-2114 | | | | | | | | |
| REHS (Print): David Tankara REHS (Signature): | | | | | | | | |
| NUVIC VUCINON CYTER JUDGOTT-2117 | | | | | | | | |