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: Multi Site Management, LLC Permit # 000357										
Address: 735 N Main St, Yreka CA 96097										
Permit Holder: Multi Site Management, LLC Permit To Operate: Valid Not Valid										
Phone: 530-842-6539 E-mail: 832@porters.us.com										
Food S	Food Safety Certified Employee: N/A Expiration Date:									
		0007 100	MAJ		cos	The marked items represent Health Code violations and must be corrected as follows:				
Time/ Temp.	1	Food Temp.	IVIZ	001	000	The marked tents represent reduct oode violations and mast be corrected as follows:				
	2	Prep./ Service				FOLLOW-UP INSPECTION CONDUCTED ON THIS DATE				
	3	Storage/ Disp.								
	4	Frozen Food				The following follow-up observations were made today in regards to rodent issue noted				
tion	5	Pure Food				on 1/14/2025 complaint inspection report:				
otec	6	Reused Food								
<u>P</u>	7	Transportation				25. 20) Observed no active/live rodents in the facility, although staff observed a live				
Food Storage	8	Storage Fac.				25, 29) Observed no active/live rodents in the facility, although staff observed a live rodent last week. Observed rodent droppings behind deli and cold beverage reach-in				
	9	Refrig. Units	50 - 20 -			refrigerators. Observed rodent droppings on the floors and inside numerous boxes of				
	10	Thermometer				foods around the ice machine area. Observed gnawed creamers and straws in ground				
	Calle	Hazardous Mat.				coffee boxes, on the sides and below ice machine. Dispose all gnawed foods immediately.				
	12	Spoils				ininiediately.				
/Equip.	J. 17 12 14	Wash/ Sanitize				Wash, clean, and sanitize all shelves, floors and hard to reach places within 7 days.				
	14	Equip. Condition				Obtain professional pest service within 7 days.				
Jten	STORY.	Utensil Condition				A REINSPECTION WILL BE CONDUCTED WITHIN 10 DAYS.				
	1000	Storage				29) 2ND NOTICE - Observed rodent droppings on the floors and hard to reach places in				
9	77.0	Handwashing	\square			the detached shed. Maintain facility in a clean manner. Clean and sanitize within 14				
oloy	DOM:	Employee Hygiene	$\vdash \vdash$			days.				
Emi	-	Employee Habits								
		Food Cert./ Card				29) 4TH NOTICE - Observed water pooling on the floors around the ice machine area.				
/ate		Water	\vdash			Observed a crack between the floor and wall in this area. Observed duct tape to temporary seal the crack. Maintain floors to be smooth, easily cleanable, durable,				
S		Cross Con.	\vdash			nonabsorbent. Ensure baseboards extend at least 4" at the junction of the floor and wall				
Wat		Liquid Waste	\vdash			with a 3/8" radius coved at the base. Repair or replace within 90 days.				
Protection Time/ Tempo Protection Time/ Time/ Tempo Protection Time/ T		Refuse								
ermi	-	Rodents/ Insects Animal/ Fowl	\vdash	×		A DEINICRECTION FEE ACCECCED FOR MON COMPLIANCE				
Vermin Waste Water	0 3				-	A REINSPECTION FEE ASSESSED FOR NON-COMPLIANCE. A REINSPECTION FEE WILL BE ASSESSED TO REPEAT NON-COMPLIANCE.				
		Ventilation Doors				A NEINOI ECTION I EL WILL BE AGGEGGED TO NEI EAT NON-COMI LIANCE.				
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acilli		Floors Walls - Ceilings		×						
ш			Н							
	32	Toilet Fac. Janitorial Fac.								
	32	-								
		Lighting Clothing - Linen								
isc.	1000									
2	CONTRACT OF THE PARTY OF T	Signs		-						
MAJ =		Misc. or violation C	UT =	Out o	f com	pliance COS = Corrected on-site				
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site Received By (Print): Received by (Signature): Date: O2/04/2025										
REHS (Print): Chalyn Dewey REHS (Signature): Phone: 530-841-2112										

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	The marked items represent h	Health Code violations and must be corrected as follows:	ows:
	i i		
×			
Received By (Print):	Re	ceived by (Signature):	Date:
Ro	ochelle Wight		02/04/2025
REHS (Print):		EHS (Signature):	Phone:
Chalyn D)ewey	ino (olgradaro).	530-841-2112

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