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: Pupuseria La Paz Permit # 000972											
Addres	SS:	1125 S Main S	Stree	t, Yr	eka,	CA 96097						
Permit Holder: Enrique Martinez Permit To Operate: Valid Not Valid												
Phone	5	30-722-7968				E-mail: pupuserialapaz2023@outlook.com						
Food S	afe	ty Certified Employ	ee: F	nria	ue M							
Food Safety Certified Employee: Enrique Martinez MAJ OUT COS The marked items represent Health Code violations and must be corrected as follows:												
Protection Time/ Temp.	1	Food Temp.	IVIAU	001	000	The marked terms represent regular obde violations and must be corrected as follows.						
	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED ON THIS DATE						
		Storage/ Disp.		X	X	3) Observed raw eggs stored above ready-to-eat food in the deli-prep cooler. Store raw food below and on separate shelves from fully cooked/ready-to-eat food. Correct ASAP.						
Tim	4	Frozen Food										
ion	5	Pure Food				1000 Bolow and on separate shelves from fully cooked/leady-to-eat lood. Confect ASAF.						
otec	6	Reused Food				13) Observed 0ppm chlorine sanitizer at dishwasher. Ensure dishwasher measures at						
Pro	7	Transportation			-	50ppm chlorine. Utilize test strips to measure concentration as needed. Corrected during						
Food Storage		Storage Fac.				inspection.						
	9	Refrig. Units	16 - 35			20) Observed the current food safety holder is listed as a food safety manager at a						
	10	Thermometer				different food establishment. Per CRFC 113947.1.H a certified food safety personnel						
poo	11	Hazardous Mat.				cannot be listed as a food safety person at another location. Obtain a new food safety						
ш	12	Spoils				manager within 30 days. 2ND NOTICE.						
p.	13	Wash/ Sanitize		X	X	A reinspection fee will be assessed for repeat non-compliance.						
Uten./Equip.	14	Equip. Condition				At tolliopositor for will be accessed for repeat from compilation.						
en./	15	Utensil Condition				25) Observed rodent droppings inside the drinking water cabinet and on the floor behind						
5	16	Storage				the soda station at front service station. Maintain facility in a clean manner at all times.						
ë	17	Handwashing				Wash, clean, and sanitize immediately.						
Employee	18	Employee Hygiene										
-mp		Employee Habits										
	20	Food Cert./ Card		X		NOTE:						
Water		Water				1) Provided Food Safety Instructor information.						
>		Cross Con.				2) Business hours: 10:30-7pm (closed 3-4) M-F						
Waste	Ov. 10	Liquid Waste										
4000	- 4	Refuse										
Vermin	-	Rodents/ Insects		Х								
Š	2 2	Animal/ Fowl			0							
		Ventilation	Н		ž.							
ies	1 8	Doors		ē.	3							
Facilities		Floors										
ш		Walls - Ceilings										
	32	Toilet Fac. Janitorial Fac.										
		Lighting										
	34	Clothing - Linen										
Misc.	5000	Signs										
		Misc.										
MAJ =			UT =	Out	of con	npliance COS = Corrected on-site						
Received By (Print): Received by (Signature): Date: Enrique Martinez 02/14/2025												
REHS (REHS (Print): REHS (Signature): Phone: 530-841-2112											

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	The marked items represent Health Code violations and must be corrected as follows:	
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Enr		02/14/2025
REHS (Print):	REHS (Signature):	

530-841-2112

Chalyn Dewey

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28		
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REHS (Print):	REHS (Signature): Phone:	

530-841-2112

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