



# 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: <b>Watson's Vets Club</b>				Permit # <b>000474</b>	
Address: <b>406 N. Mount Shasta Blvd., Mount Shasta, CA, 96067</b>					
Permit Holder: <b>Kris Watson</b>				Permit To Operate: <input type="checkbox"/> Valid <input type="checkbox"/> Not Valid	
Phone: <b>530-926-3565</b>		E-mail: <b>kris@watsonsvetclub.com</b>			
Food Safety Certified Employee: <b>Kris Watson</b>				Expiration Date: <b>05/2022</b>	

  

		MAJ	OUT	COS	
Protection Time/ Temp.	1 Food Temp.				<p style="text-align: center;"><b>ROUTINE INSPECTION CONDUCTED THIS DATE</b></p> <p>13) Observed excessive buildup of slime or mold inside the ice machine. Maintain equipment in a cleanly matter at all times to prevent contamination of food. Empty ice and clean machine according to manufacturers instructions. 5th NOTICE</p> <p>13) Observed no sani-bucket used to store working wiping cloths. Keep all working wiping cloths in a sani-bucket with 100 ppm Chlorine or 200 ppm Quat, at all time. Correct immediately. 3RD NOTICE</p> <p>14) Observed dishwasher dispensing 10 ppm Cl. For mechanical warewashing, this machine is required to dispense 50 ppm Cl. Utilize test strips to ensure that dishwasher is dispensing the proper concentration of sanitizer daily.</p> <p>16) Observed ice scoop stored on top of the ice machine. Store utensil in a manner that protects against contamination. Wash, rinse, and sanitize ice scoop immediately. Do not store ice scoop on top of the machine. Store scoop inside the machine with the handle up to prevent against contaminating the ice or store in a container that is wash, rinse, and sanitized daily. Correct immediately. 3RD NOTICE</p> <p>16) Observed the ice scoop used at the bar to prepare drinks stuffed between bottles of liquor and the side of the ice chest. This area is not cleaned and sanitized regularly. Discontinue storing the ice scoop in this manner. Store in a manner that is not going to contaminate the utensil, and wash scoops daily. Corrected during inspection.</p> <p>20) Employee didn't have a food handler card available for inspection. Keep a copy of all food handler cards and food manager certificates available for inspection at all times. 2ND NOTICE</p> <p>20) Food manager certification is expired. 3RD NOTICE To avoid future fines, please obtain a food manager certificate immediately. A food facility may be fined \$100 per day that it operates without a current food manager certification. This fine will start from the date of this report. To avoid it, provide a copy of the certificate prior to next inspection.</p> <p>Reinspection fee is assessed for non-compliance. Future non-compliance will result in fees, an administrative hearing, and potential permit revocation. Invoice provided.</p>
	2 Prep./ Service				
	3 Storage/ Disp.				
	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		X		
	14 Equip. Condition		X		
	15 Utensil Condition				
Employee	16 Storage		X		
	17 Handwashing				
	18 Employee Hygiene				
	19 Employee Habits				
Water	20 Food Cert./ Card		X		
	21 Water				
Waste	22 Cross Con.				
	23 Liquid Waste				
Vermin	24 Refuse				
	25 Rodents/ Insects				
Facilities	26 Animal/ Fowl				
	27 Ventilation				
	28 Doors				
	29 Floors				
	30 Walls - Ceilings				
	31 Toilet Fac.				
	32 Janitorial Fac.				
Misc.	33 Lighting				
	34 Clothing - Linen				
	35 Signs				
	36 Misc.				

  

MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site	
Received By (Print): <b>Sharonne Vaughan</b>	Received by (Signature): _____ Date: <b>02/24/2025</b>
REHS (Print): <b>Rick Florendo</b>	REHS (Signature): _____ Phone: <b>530-841-2114</b>

**Facility Name:** Watson's Vets Club

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

Received By (Print): Sharonne Vaughan	Received by (Signature):	Date: 02/24/2025
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REHS (Print): Rick Florendo	REHS (Signature):	Phone: 530-841-2114
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