

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	Na	me: Smokey's	Wee	ed P	ub	Permit #				
Address: 203 Main St Weed Ca 96094										
Permit Holder: Permit To Operate:										
DL		Johnny Ba	rton			Valid Not Valid				
	Phone: 530-408-6823 E-mail: johnnybarton1999@gmail.com									
Food S	Food Safety Certified Employee: NA Expiration Date: NA									
			MAJ	OUT	cos	The marked items represent Health Code violations and must be corrected as follows:				
Ď.	1	Food Temp.				ROUTINE INSPECTION CONDUCTED ON THIS DATE				
ne/ Tem	2	Prep./ Service				TOOTINE INCIDENTIAL CONDUCTED ON THIS BATE				
	3	Storage/ Disp.								
Tin	4	Frozen Food				36) Weed Pub has changed ownership, new name is Smokey's Weed Pub. The current				
Protection Time/ Temp.	5	Pure Food				owner/operator of Smokey's Weed Pub will need to submit a application for permit to this Department.				
	6	Reused Food								
Д	7	Transportation								
Ф	8	Storage Fac.								
orag	9	Refrig. Units								
Food Storage	10	Thermometer		3						
-000	11	Hazardous Mat.								
	12	Spoils			-					
di.	13	Wash/ Sanitize		ŝ.						
Uten./Equip.	14	Equip. Condition								
ten.	15	Utensil Condition								
Ď	16	Storage		3						
Ф	17	Handwashing								
loye	18	Employee Hygiene								
Employee	19	Employee Habits								
	20	Food Cert./ Card								
Water	21	Water								
Ň	22	Cross Con.								
Waste	23	Liquid Waste								
	24	Refuse								
'ermin		Rodents/ Insects								
Ver	26	Animal/ Fowl			9					
	27	Ventilation								
S	28	Doors		į.						
Facilities	29	Floors								
Fac	30	Walls - Ceilings								
	31	Toilet Fac.								
	32	Janitorial Fac.								
	33	Lighting								
SC.	34	Clothing - Linen								
Misc.	35	Signs								
		Misc.		X						
			UT =	Out	of com	pliance COS = Corrected on-site				
Received By (Print): Received by (Signature): Date: John Barton 3/4/2025										
REHS (Print): Alexa Roche REHS (Signature): Phone: 530-841-2117										

Facility Name:	Smokey's Weed Pub	
	The marked items represent Health Code violations and must be corrected as follows:	
18		
Received By (Print):	Received by (Signature): Date:	
		3/4/2025
REHS (Print):	REHS (Signature): Phone	CANCELLO HEAVENING

530-841-2117

Alexa Roche

Facility Name:	Smokey's Weed Pub	
	The marked items represent Health Code violations and must be corrected as follows:	
7.8		
Received By (Print):	Received by (Signature): Date:	
		3/4/2025
REHS (Print):	REHS (Signature):	New York - Seat Section 2

530-841-2117

Alexa Roche

Facility Name:	Smokey's Weed Pub	
	The marked items represent Health Code violations and must be corrected as follows:	
×		
	<u>s</u>	
Received By (Print):	Received by (Signature): Date	
Late Control	(Sp. 1997)	/4/2025
REHS (Print):	REHS (Signature): Phor	ie:

530-841-2117

Alexa Roche