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: Nature's K	Citche	n		Permit # 000359					
Address: 412 South Main St. Yreka, CA 96097											
Permit Holder: Clifford Clouse Permit To Operate: Valid Not Valid											
Phone: 530-842-1136 E-mail:											
Food S	Food Safety Certified Employee: Clifford Clouse Expiration Date: 11/2028										
MAJ OUT COS The marked items represent Health Code violations and must be corrected as follows:											
	1	Food Temp.	110.10	001	000						
emp	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE					
Protection Time/ Temp.	3	Storage/ Disp.									
	4	Frozen Food				ALL FOOD HANDLING IS SATISFACTORY AT PRESENT TIME.					
tion	5	Pure Food									
Protect	6	Reused Food									
	7	Transportation				29) 2nd Notice- Observed damaged floors throughout the kitchen and front service area					
Can	8	Storage Fac.				behind display cases and walkway. Observed baseboard missing in the food prep area. Maintain floors in all areas in which food is prepared, prepackaged, or stored, where any					
rage	9	Refrig. Units				utensil is washed to be easily cleanable, nonabsorbent, smooth, and durable in					
Uten./Equip. Food Storage	10	Thermometer				construction. Ensure floors are coved at the juncture of the floor and wall with a 3/8"					
	11	Hazardous Mat.				minimum radius coving and extend up the wall at least 4".					
ш	12	Spoils				A 1 year extension to repair floors was provided on 05/23/2024. Facility has 60 days to					
ip.	13	Wash/ Sanitize				repair or correct floors.					
Equ	14	Equip. Condition				30) 2nd Notice - Observed the wall below warewashing area is severely damaged (mold					
en./	15	Utensil Condition				growth, wood rot, insulation exposed etc) from previous plumbing problem. Ensure walls					
รั	16	Storage				to be smooth, easily cleanable, nonabsorbent, and durable.					
Ф	17	Handwashing				A 1.5 year extension to repair the wall in this area was provided on 05/23/2024. Re					
oye	18	Employee Hygiene				or correct wall by 12/2025.					
ldu	19	Employee Habits				30) 2nd Notice - Observed damaged and paint chipping off walls throughout the kitchen.					
	20	Food Cert./ Card				Maintain walls as to be smooth, easily cleanable, nonabsorbent, and durable. A 6					
iter	21	Water				repair extension was provided on 05/23/2024. Repair or correct within 60 days.					
e Water		Cross Con.				30) 2nd Notice - Observed damaged or painting peeling off ceiling in the cooks area					
		Liquid Waste				(above convection oven). Maintain walls and ceilings in good repair and in a manner to					
day of	_	Refuse				be nonabsorbent, smooth, easily cleanable, and durable in construction. A 6 month					
cilities Vermin Waste Water Employee		Rodents/ Insects				repair extension was provided on 05/23/2024. Repair or correct within 60 days.					
		Animal/ Fowl									
		Ventilation	Ш			A reinspection fee will be assessed for future repeat violation.					
es		Doors									
ciliti		Floors		X		Note: Facility is no longer serving hot foods, except baked goods. According to CRFC,					
Fa	30	Walls - Ceilings		X		food prep is defined as packaging, processing, assembling, portioning, or any operation					
	-	Toilet Fac.	ш			that changes the form, flavor, or consistency of food. Baking food is considered food					
		Janitorial Fac.				preparation and all parts related to food operation is to be maintained according to California Health and Safety Code as outlined in CRFC.					
		Lighting				Camornia Ficality and Calcty Code as Califfed III ON C.					
Misc.		Clothing - Linen									
		Signs									
MA I -		Misc. or violation C	VIIT -	Out	fcom	pliance COS = Corrected on-site					
		y (Print):	701 -	Out 0	COIL	pliance COS = Corrected on-site Received by (Signature): Date:					
Clifford Clause 03/20/2025											
REHS (Print): REHS (Signature): Phone: 530-841-2112											

Facility Name:	Nature's Kitchen	
	The marked items represent Health Code violations and must be corrected as follows:	
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Received By (Print):	Received by (Signature): Date:	
Cli	fford Clause	03/20/2025
REHS (Print):	REHS (Signature):	

530-841-2112

Chalyn Dewey

Facility Name:	Nature's Kitchen	
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Received By (Print):	Received by (Signature): Date:	
		03/20/2025
REHS (Print):	REHS (Signature): Phone	

530-841-2112

Chalyn Dewey

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