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	Nai	me: Yreka Elk'	s Lo	dge		Permit # 000495					
Addres	s:	322 W Miner S			eka	CA 96097					
Permit			MOO	4, 11	Cita	Permit To Operate:					
	Yreka Elks Valid Not Valid										
Phone: 530-842-1980 E-mail: brianfavero@cot.net											
Food S	Food Safety Certified Employee: Coleman Fitzgerald Expiration Date: 03/2029										
	The marked items represent Health Code violations and must be corrected as follows:										
Protection Time/ Temp.	1	Food Temp.				DOUTING NODESTION CONDUCTED THIS DATE					
	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE					
	3	Storage/ Disp.				13) Observed greater than 200ppm chlorine sanitizer in working spray bottle in the					
	4	Frozen Food									
	5	Pure Food				kitchen. Safe chlorine sanitizer measures at 100ppm. Corrected during inspection.					
	6	Reused Food									
	7	Transportation				13) Observed slimy mold buildup on the ice damper/diverter inside the ice machine located at the bar area. Prevent cross contaminating ice by maintaining equipment in					
Food Storage	8	Storage Fac.				clean manner at all times. Discontinue use, dispose all ice, and wash, clean, and					
	9	Refrig. Units	53 - 3 <i>7</i>			sanitizer inside ice cabinet according to manufacturer instructions. Correct immediately.					
	10	Thermometer				Section and the section of the secti					
poo	11	Hazardous Mat.				13) Observed no chlorine test strips in the kitchen or bar to measure sanitizer solution.					
ш	12	Spoils				Obtain test strips immediately.					
<u>o</u>	13	Wash/ Sanitize		×	X						
Uten./Equip.	14	Equip. Condition									
en./	15	Utensil Condition									
5	16	Storage									
е	17	Handwashing									
Employee	18	Employee Hygiene									
ldw	19	Employee Habits									
ш	20	Food Cert./ Card									
Water	21	Water									
	22	Cross Con.									
Waste	23	Liquid Waste									
	24	Refuse									
ermin/	0.0	Rodents/ Insects									
Ver	26	Animal/ Fowl									
	27	Ventilation									
S	28	Doors									
Facilities	29	Floors									
Fac	30	Walls - Ceilings									
	31	Toilet Fac.									
ı	32	Janitorial Fac.									
Misc.	33	Lighting									
	34	Clothing - Linen									
	35	Signs									
		Misc.									
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site											
Received By (Print): Received by (Signature): Date: 03/21/2025											
REHS (Print): REHS (Signature): Phone: 530-841-2112											

Facility Name:	Yreka Elk's Lodge	
	The marked items represent Health Code violations and must be corrected as	follows:
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Received By (Print): De REHS (Print):	Received by (Signature): ebbie Rokes REHS (Signature):	Date: 03/21/2025 Phone:

530-841-2112

Chalyn Dewey

Facility Name:	Yreka Elk's Lodge	
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Deb	bie Rokes	03/21/2025
REHS (Print):	REHS (Signature):	one:

530-841-2112

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*		
Descripted Description	Despited by /Signature):	Data
7-00-00 A	Received by (Signature): [Date: 03/21/2025
REHS (Print): Chalyn [REHS (Signature): Dewey	Phone: 530-841-2112