## Food Program Official Inspection Report



Siskiyou County Community Development Department Environmental Health Division 806 S. Main Street Yreka, California 96097

						priorie: (550) 641-2100, fax. (550) 641-4076						
Facility Name: Mt. Shasta Supermarket Permit # 000354												
Addres	SS:	112 E Alma St	., Mc	ount	Sha	sta, CA	20-28-0-1900 V.T. C. (1994) 1820					
Permit	ermit Holder:  Keith Cool  Permit To Operate:  Valid  Not Valid											
Phone	5	30-926-2212				E-mail: mountshastasupermarket@gmail.						
Food S		ty Certified Employ	ee: L	aura	Sco		Expiration Date: 10/2028					
MAJ OUT COS The marked items represent Health Code violations and must be corrected as follows:												
	1	Food Temp.	IVIAJ	X	X	The marked items represent realth Code violations and must	be corrected as follows.					
dwa	2	Prep./ Service	Н	^	$\hat{}$	ROUTINE INSPECTION CONDUCTED T	HIS DATE					
€/Te	Alterial Control	Storage/ Disp.	Н	X								
<u>iii</u>	, waster,	Frozen Food										
Protection Time/ Temp.	. 7/4	Pure Food	$\vdash\vdash$			1) Observed numerous foods held under heat lamps @ 10	0-110 degrees F Hold all					
	CONTRACT.	Reused Food	$\vdash\vdash$			hot food @ 135 degrees F or hotter. Corrected during inspection.						
					-							
_	-	Transportation	$\vdash\vdash$			1) Observed numerous deli meats held in the deli prep cool						
ge		Storage Fac.	E2 22	~	5	all cold food @ 41 degrees F or colder. Corrected during in	nspection					
tora	Name and	Refrig. Units	$\vdash\vdash\vdash$	×		44) Observed two best leaves with its frame the best healthing	And This was that in the					
ip. Food Storage		Thermometer		^	0	14) Observed two heat lamps missing from the hot holding above foods failing to remain hot during holding. Ensure th						
Foo	COLUM,	Hazardous Mat.	$\square$			in in good repair at all times. Corrected during inspection.	at all equipment is functional					
dir.	2 2	Spoils										
din .	, year and	Wash/ Sanitize	$\sqcup$			14) Observed the deli prep cooler not sufficiently holding th						
Æ		Equip. Condition	Ш	X	Ensure that this equipment is functional and in good rep	Ensure that this equipment is functional and in good repair						
Uten./Equip.		Utensil Condition	Ш			if at any time that it cannot hold the foods at 41 degrees F of	or colder. Correct asap.					
ž	16	Storage				2) Observed have of food stand on the floor of all the wells in re-	k in refrigeration units					
Ф	17	Handwashing				<ol> <li>Observed boxes of food stored on the floor of all the wall Ensure that all food is stored at least 6" off the ground. Con</li> </ol>						
loye		Employee Hygiene				Enoure that all lood is stored at loads of on the ground. Ook	root irimodiatory.					
dw:		Employee Habits	Ш			3) Observed ready-to-eat foods stored next to and below ra	w meats. Store all read-to-					
	20	Food Cert./ Card	Ш	X		eat food above raw meats at all times. Correct immediately	/-					
ater		Water	Ш			40.01						
>	22	Cross Con.				10) Observed no thermometer available to measure the ten and other foods in the deli prep cooler, and the foods held u						
Waste Water Emplo	23	Liquid Waste	Ш			a thermometer immediately and ensure that all foods are su						
		Refuse				to ensure that they don't enter the danger zone. The danger zone is betwee						
Vermin	25	Rodents/ Insects	Ш			degrees F.						
Ver	26	Animal/ Fowl										
	27	Ventilation				20) Observed several employees working in the deli area w	ith expired or no food					
S	28	Doors				handler certifications. All employees are required to obtain 30 days of hire. Correct immediately.	a food nandiers card within					
-acilities	29	Floors				30 days of fille. Coffeet infinediately.						
Fac	30	Walls - Ceilings										
	31	Toilet Fac.										
	32	Janitorial Fac.										
	33	Lighting										
c.	34	Clothing - Linen										
Misc.	35	Signs										
	36	Misc.										
			UT =	Out	of con	npliance COS = Corrected on-site						
Receive	ed By	(Print): Luke Sta	arling	g		Received by (Signature):	Date: 03/24/2025					
REHS (Print): REHS (Signature): Phone: 530-841-2114												

Facility Name: Mt. Shasta Super	market	
The marked item	s represent Health Code violations and must be co	rrected as follows:
a a		
	8	
Received By (Print):	Received by (Signature):	Date:
Luke Starling		03/24/2025
REHS (Print):	REHS (Signature):	Phone:
Rick Florendo		530-841-2114

Facility Name:	Mt. Shasta Supermarket	
	The marked items represent Health Code violations and must be corrected as follows:	
*		
Received By (Print):	Received by (Signature):  Date:  Starling	3/24/2025
REHS (Print):	REHS (Signature): Phone	

530-841-2114

Rick Florendo

Facility Name:	Mt. Shasta Supermarket	
	The marked items represent Health Code violations and must be corrected as follows:	
×		
	8	
Received By (Print):	Received by (Signature):	ate:
Luk	ke Starling	03/24/2025
REHS (Print):	REHS (Signature):	none:
Rick Flor	orendo	530-841-2114

530-841-2114