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: Yreka Tru	ck S	top		Permit # 000557					
Addres	SS:	787 Montague	Rd.	, Yre	ka,	CA 96097					
Permit	Permit Holder:Permit To Operate:										
Phone	Yreka Properties LLC E-mail:										
	550-200-6954 yrekatraveipiaza@gmaii.com										
Food S	Food Safety Certified Employee: Stacey Perryman Expiration Date: 04/2028										
			MAJ	OUT	cos	The marked items represent Health Code violations and must be corrected as follows:					
Protection Time/ Temp.	STILL	Food Temp.				FOLLOW-UP INSPECTION CONDUCTED ON THIS DATE					
	3200	Prep./ Service				TOLEST OF THE ESTIGIT SOURS OF THE BATE					
		Storage/ Disp.				Follow-up inspection is to observed rodent issues noted on 02/12/2025 inspection report. The following are observations found: Observed no evidence or signs of rodent presence in the overstock alcohol storage area					
	200	Frozen Food									
ectio	CONTRACT.	Pure Food									
rote		Reused Food									
П		Transportation				in the back.					
Food Storage		Storage Fac.	- 25		-						
	Season .	Refrig. Units				29) Observed a noticeable and sufficient size gap on the bottom of both roll-up garage					
	3 3	Thermometer		3	8	doors where rodents, insects, or dust can enter at both dry storage areas. Ensure facility is completely enclosed to prevent dust or harborage of contaminants. Repair or correct					
Foc		Hazardous Mat.				within 30 days.					
Scool	5 5	Spoils			e o						
Uten./Equip.	J. 19 19 19 19 19 19 19 19 19 19 19 19 19	Wash/ Sanitize			,						
ı./Ec	- 0	Equip. Condition		:	-						
Jten	7	Utensil Condition									
_		Storage									
99		Handwashing		3	-						
Employee		Employee Hygiene									
Em		Employee Habits Food Cert./ Card									
-	7										
Water	CHICAGO	Water Cross Con.									
		Liquid Waste									
Waste		Refuse									
40000		Rodents/ Insects			-						
ermin/	To Carry	Animal/ Fowl		Н							
>		Ventilation			0						
		Doors		Н							
ties	3 8	Floors		×) -						
Facilities		Walls - Ceilings		^							
ш		Toilet Fac.	Н								
	Table 1	CONTRACTOR CONTRACTOR CONTRACTOR		Н							
	- 3	Lighting									
Misc.		Clothing - Linen		\vdash							
	1000	Signs									
		Misc.									
MAJ =			UT =	Out	of con	npliance COS = Corrected on-site					
Received By (Print): Received by (Signature): Date: Stella Lemon 04/10/2025											
REHS (Print): Chalyn Dewey REHS (Signature): Phone: 530-841-2112											

Facility Name:	Yreka Truck Stop	
	The marked items represent Health Code violations and must be corrected as follows:	
18		
Received By (Print):	Received by (Signature): Date: ella Lemon (04/10/2025
REHS (Print):	REHS (Signature): Phone	1961 H. On Contract of the Experience

530-841-2112

Chalyn Dewey

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RFHS (Print):	REHS (Signature): Phone	

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