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 Name: Yak Shack Permit # 000731 | | | | | | | | | | |
|--|--|---------------------|---------|-----|--------|--|--|--|--|--|
| Address: 401 Mount Shasta Blvd., Mount Shasta, CA, 96067 | | | | | | | | | | |
| Permit | Hol | der: Alyssa Will | iams | i | | Permit To Operate: Valid Not Valid | | | | |
| Phone: 530-209-5542 E-mail: awilliams26@icloud.com | | | | | | | | | | |
| Food Safety Certified Employee: Expiration Date: | | | | | | | | | | |
| MAJ OUT COS The marked items represent Health Code violations and must be corrected as follows: | | | | | | | | | | |
| Protection Time/ Temp. | 1 | Food Temp. | | | | | | | | |
| | 2 | Prep./ Service | | X | | ROUTINE INSPECTION CONDUCTED THIS DATE. | | | | |
| | 3 | Storage/ Disp. | | | | | | | | |
| | 4 | Frozen Food | | | | 2) Observed numerous paper cups used as scoops for for various food products | | | | |
| tion | 5 | Pure Food | | | | throughout the facility. Utilize scoops with handles for all food prep. Ensure that the | | | | |
| otec | 6 | Reused Food | | | | handles for the scoops doesn't touch the food. Correct immediately. | | | | |
| Pr | 7 | Transportation | | | | 11) Observed a couple of bottles of chemicals that have been portioned from the origin | | | | |
| 40 | 8 | Storage Fac. | | | | container that were unlabeled. Label all chemical bottles. Correct immediately. | | | | |
| rag | 9 | Refrig. Units | 5.0 3.7 | | | that here anabeled. Lazer an enemical potters. Contest miniocation, | | | | |
| Food Storage | 10 | Thermometer | | | | 11) Observed liquid dish soap stored on a shelf labeled "cleaning products" located | | | | |
| | 11 | Hazardous Mat. | | X | | above the food preparation sink and surfaces. Store all cleaning products in a | | | | |
| ш | 12 | Spoils | | | | designated area that is not above any food handling areas or food storage areas. Corrected during inspection. | | | | |
| <u>a</u> | 13 | Wash/ Sanitize | | X | | Corrected during inspection. | | | | |
| Uten./Equip. | 14 | Equip. Condition | | | | 13) Observed numerous working wiping cloths stored on food prep surfaces throughout | | | | |
| ten./ | 15 | Utensil Condition | | | | the facility. Store these working cloths in a sanitizer solution of 200 ppm Quat or 10 | | | | |
| Ď | 16 | Storage | | | | ppm Chlorine when not in use. Correct immediately. | | | | |
| æ | | Handwashing | | | | 13) Observed pink buildup on the inside of the ice machine. Maintain ice machine in a | | | | |
| loye | 18 | Employee Hygiene | | | | cleanly manner at all times. Check ice machine more frequently to monitor when the | | | | |
| Employee | | Employee Habits | | | | machine requires cleaning. Clean in accordance with manufacturer's instructions, asap. | | | | |
| | 20 | Food Cert./ Card | | | | | | | | |
| Water | | Water | Ш | | | 24) Observed back dumpster area is littered with cardboard and other trash and with the | | | | |
| | | Cross Con. | | | | lids of the dumpster left open. Ensure all trash is discarded inside the container and the lids are kept closed at all times. Corrected during inspection. | | | | |
| Waste | | Liquid Waste | | | | ilds are kept closed at all times. Corrected during inspection. | | | | |
| 4000 | - | Refuse | | X | X | 36) Observed that the concrete pathways between the kitchen and food storage areas is | | | | |
| Vermin | 100000 | Rodents/ Insects | | | | soiled heavily with grease, dirt, and other build-up. Ensure this area is maintained in a | | | | |
| Ve | 26 | Animal/ Fowl | | | 8 | cleanly manner at all times. Clean asap. | | | | |
| | - | Ventilation | | | | | | | | |
| es | | Doors | | | 8 | | | | | |
| Facilities | - Carrier III | Floors | | | | | | | | |
| Fa | 30 | Walls - Ceilings | | | | | | | | |
| | | Toilet Fac. | | | | | | | | |
| | 32 | Janitorial Fac. | | | | | | | | |
| | | Lighting | | | | | | | | |
| Misc | 1 | Clothing - Linen | | | | | | | | |
| | CONTRACT AND ADDRESS OF THE PARTY OF THE PAR | Signs | | | | | | | | |
| ΜΔΙ- | | Misc. | ILIT - | Out | of com | pliance COS = Corrected on-site | | | | |
| MAJ = Major violation OUT = Out of compliance COS = Corrected on-site Received By (Print): Received by (Signature): Date: | | | | | | | | | | |
| Bobby Malanga 04/21/2025 | | | | | | | | | | |
| REHS (Print): REHS (Signature): Phone: 530-841-2114 | | | | | | | | | | |

| Facility Name: | Yak Shack | | |
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| REHS (Print): | | Signature): | Phone: |
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| REHS (Print): | REHS (Signature): | none: |
| Rick Flo | prendo | 530-841-2114 |

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