

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: Northern United Siskiyou Charter 505										
Addres	S:	505 S Broadw		No. of the Control	to produce and the production of the restaura.					
Permit Holder: Northern United Siskiyou Charter School Permit To Operate: Valid Not Valid										
Phone:	5	30-842-4509			E-mail: sjespersen@nuchar	ters.org				
Food Safety Certified Employee: N/A Expiration Date:										
		EST 6550 121		OUT CO	The marked items represent Health Code vio	plations and must be corrected as follows:				
100*1	1	Food Temp.	IVIAJ	001 00	The marked items represent riealth Code vic	olations and must be corrected as follows.				
Protection Time/ Temp.	No.	Prep./ Service			ROUTINE INSPECTION COND	UCTED ON THIS DATE				
	3	Storage/ Disp.								
	4	Frozen Food			-					
	5	Pure Food			1					
tect	1800	Reused Food	T							
Prof	7	Transportation			1					
	8	Storage Fac.			-					
Food Storage	_	Refrig. Units	F 3		1					
	Ten Prince	Thermometer	\Box		SATISFACTORY AT P	RESENT TIME.				
poo		Hazardous Mat.		- 6						
P.	-	Spoils	T		-					
Uten./Equip.	_	Wash/ Sanitize			-					
		Equip. Condition								
		Utensil Condition								
Ute	_	Storage								
0	COLUMN TO SERVICE	Handwashing								
Employee	18	Employee Hygiene		-						
mpk	19	Employee Habits								
Ш	20	Food Cert./ Card								
ter	21	Water								
Water	22	Cross Con.								
Waste	23	Liquid Waste								
Wa	24	Refuse								
Vermin	25	Rodents/ Insects								
Ver	26	Animal/ Fowl								
	27	Ventilation								
Se	28	Doors								
Facilities	, October 1	Floors	Ш							
Fa	30	Walls - Ceilings		-						
	31	Toilet Fac.	Ш							
	32	Janitorial Fac.								
		Lighting								
Misc.	- 1	Clothing - Linen			_					
		Signs			_					
MA I -		Misc.	VIIT -	Out of co	ampliance COS - Corrected on eite					
			101 = 1	Out of Co	ompliance COS = Corrected on-site Received by (Signature):	Date:				
Eric Clause 05/16/2025										
REHS (Print): REHS (Signature): Phone: 53						Phone: 530-841-2112				

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Facility Name: Northern United Siskiyou Charter 505		
	The marked items represent Health Code violations and must be corrected as follows:	
*		
Received By (Print):	Received by (Signature): Date: ic Clause	05/16/2025
REHS (Print):	REHS (Signature): Phone	

530-841-2112

Chalyn Dewey

Facility Name:	Northern United Siskiyou Charter 505		
	The marked items represent Health Code violations and must be corrected as follows:		
×			
	•		
Received By (Print):	Received by (Signature):	Date:	
	: Clause	05/16/2025	
REHS (Print):	REHS (Signature):	Phone:	
Chalyn I	Dewey	530-841-2112	

Facility Name:	Northern United Siskiyou Charter 505	
	The marked items represent Health Code violations and must b	e corrected as follows:
×		
Received By (Print):	Received by (Signature):	Date:
Eric	Clause	05/16/2025
REHS (Print): Chalyn [REHS (Signature): Dewey	Phone: 530-841-2112