## 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: Comfort In	n- Y	reka		Permit # 000184					
Addres	S:	1804 B Fort Jo	nes	Rd.,	Yre	ka, CA 96097					
Permit Holder: Permit To Operate:											
Dhana	Vjay Kumar  E-mail: am yrekecemferting@gmail.com										
Phone:	530-331-6036 gm.yrekacomorunin@gmail.com										
Food S	ood Safety Certified Employee: Anna Perez Expiration Date: 03/2028										
			MAJ	OUT	cos	The marked items represent Health Code violations and must be corrected as follows:					
Protection Time/ Temp.	1	Food Temp.				ROUTINE INSPECTION CONDUCTED ON THIS DATE					
	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED ON THIS DATE					
	3	Storage/ Disp.				29) Observed the warewashing sink plumbed directly into floor sink. Ensure this unit is					
n Ţ	4	Frozen Food									
ctio	1800	Pure Food									
rote	6	Reused Food				plumbed indirectly with atleast a 1" airgap above the top of the sink. Repair or correct within 30 days.					
ш		Transportation				Willing Go days.					
orage	_	Storage Fac.	-20								
	Name of Street	Refrig. Units									
d St	10	Thermometer									
Foo		Hazardous Mat.									
2020	9 9	Spoils									
uip.	, 10 may	Wash/ Sanitize	$\Box$								
Æ.	_	Equip. Condition			-						
Jten	-	Utensil Condition									
7	-	Storage									
99	- 1	Handwashing									
yolo	The same of	Employee Hygiene									
Emp		Employee Habits									
	1000	Food Cert./ Card									
/ate	CHANGE	Water	$\vdash$								
<b>S</b>		Cross Con.									
/aste	23	Liquid Waste									
Facilities Vermin Waste Water Employee Uten./Equip. Food 3		Refuse									
ermir	100	Rodents/ Insects									
>	-	Animal/ Fowl			8						
	27	Ventilation									
es	-	Doors	-								
acilit	29	Floors		X							
щ		Walls - Ceilings		4	-						
	·	Toilet Fac.	-								
	32	Janitorial Fac.			-						
Misc.		Lighting Linen									
	- 355	Clothing - Linen									
		Signs									
MA.I -		Misc. or violation C	UT -	Out	of com	npliance COS = Corrected on-site					
	MAJ = Major violation OUT = Out of compliance COS = Corrected on-site  Received By (Print): Received by (Signature): Date:										
Kayla Mclearn 04/11/2025											
REHS (	Print	): Chalyn Dewe	ey .			REHS (Signature): Phone: 530-841-2112					

Facility Name:	Comfort Inn- Yreka		
	The marked items represent Health Code viol	ations and must be corrected as follows:	
*			
	8		
Received By (Print):	Received by (Signato	ıre): Date:	
Ka	yla Mclearn	04/11/2025	
REHS (Print):	REHS (Signature):	Phone:	
Chalyn D	ewey	530-841-2112	

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Kayl	la Mclearn (	04/11/2025
REHS (Print):	REHS (Signature): Phone	The section of the se

530-841-2112

Chalyn Dewey

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	ý.	
Received By (Print):	Received by (Signature): Date of the Control of the	
	30000 ACC 9 (CONT.)	04/11/2025
REHS (Print):	REHS (Signature): Ph	one:

530-841-2112

Chalyn Dewey