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		me: Grocery O	utlet	i		Permit # 000:	249				
Addres	S:	121 Montague	Roa	ad, Y	'reka	a, CA 96097					
Permit	Hol	der: Steve and	Reb	ecca	Sel	Permit To Ope	erate: Not Valid				
Phone	5	30-842-7700				E-mail: yreka@groceryoutlet.com					
Food S	afe	ty Certified Employ	ee: N	I/A		Expiration Date	e:				
			MAJ	OUT	cos	The marked items represent Health Code violations and must be corrected as f	follows:				
o.	1	Food Temp.		X		·					
Protection Time/ Temp.	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE	AIE				
le/ T	3	Storage/ Disp.				1) Observed prepackaged tofu, rice noodles, kimchi and produce held at produce of					
<u>E</u>	4	Frozen Food				measuring between 45-49F. Hold cold foods at 41F or colder. Correct im	ct immediately.				
tion	5	Pure Food									
otec	6	Reused Food				10) Observed the display thermometers at the cooler mentioned above indicating					
P	7	Transportation				temperature of 36F and 37F. Obtain hanging thermometers and display to	them at the				
Food Storage	8	Storage Fac.				warmest location (ie front) of the refrigerator. Correct immediately.					
	9	Refrig. Units	100								
	10	Thermometer		X							
	11	Hazardous Mat.									
ш	12	Spoils									
ď	13	Wash/ Sanitize									
Uten./Equip.	14	Equip. Condition									
en./	15	Utensil Condition									
ž	16	Storage									
o)	17	Handwashing									
Employee	18	Employee Hygiene			2						
mple	19	Employee Habits									
Ш	20	Food Cert./ Card									
ter	21	Water									
Water	22	Cross Con.									
Waste	23	Liquid Waste									
Wa	24	Refuse									
min	25	Rodents/ Insects									
Verm	26	Animal/ Fowl									
	27	Ventilation									
S	28	Doors									
Facilities	29	Floors									
Fac	30	Walls - Ceilings			2						
	31	Toilet Fac.									
	32	Janitorial Fac.									
	33	Lighting									
Misc.	34	Clothing - Linen									
	35	Signs									
		Misc.									
			UT =	Out	of com	npliance COS = Corrected on-site					
Receive	d By	(Print): Rebecc	a Se	llers		Received by (Signature): Date: 05/30/	2025				
REHS (Print): Chalyn Dewey						REHS (Signature): Phone: 530-8	41-2112				

Facility Name: Grocery Outlet			
	The marked items represent Health Code violations and must be corrected as follows:		
	,		
	Descriped by (Construct)		
Received By (Print): Re	Received by (Signature): Date: becca Sellers	05/30/2025	
REHS (Print):	REHS (Signature): Phone	10 - 5 Au 20 - 10 00 00 00 00 00 00 00 00 00 00 00 00	

530-841-2112

Chalyn Dewey

Facility Name:		
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	•	
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REHS (Print):	REHS (Signature): Phone	

530-841-2112

Chalyn Dewey

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City-ru for	pecca Sellers	05/30/2025						
REHS (Print): Chalyn [REHS (Signature):	Phone: 530-841-2112						