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	Nai	me: Miner Stre	et M	eat I	Mark	ket Permit # 000328						
Addres	S:	200 West Mine	er Sti	reet,	Yre	ka, CA 96097						
Permit		der:		9250		Permit To Operate:						
Dhara		Ken and Lo	rena	a Ba	rns	✓ Valid Not Valid						
	Phone: 530-842-6328 E-mail: kb96097@outlook.com											
Food S	Food Safety Certified Employee: Austin L. Hoy Expiration Date: 03/2028											
			-	OUT	_	The marked items represent Health Code violations and must be corrected as follows:						
Ď.	1	Food Temp.				FOLLOW UP INCRECTION CONDUCTED ON THIS DATE						
ne/ Tem	2	Prep./ Service				FOLLOW-UP INSPECTION CONDUCTED ON THIS DATE						
	3	Storage/ Disp.				A follow-up inspection was conducted in regards to rodent droppings and removal of						
Ē	4	Frozen Food										
Protection Time/ Temp.	5	Pure Food				unapproved equipment noted on previous inspection report. The following are observations found:						
	6	Reused Food										
	7	Transportation				Facility cleaned and sanitized all evidence of rodent droppings in the dry storage area in						
Food Storage	8	Storage Fac.				the basement.						
	9	Refrig. Units	815 - A33									
Stc	10	Thermometer				Facility has not removed the vacuum sealing equipment but has cellophane wrapped the						
00-	11	Hazardous Mat.				equipment shut. Facility is approved to store unused equipment onsite. However, if it is observed facility is using this equipment or that the storage of unused equipment create						
ш	12	Spoils		i i		a hazard, attracts or harbors vermin, insects, rodents, dust, etc, it will be required to be						
Uten./Equip.	13	Wash/ Sanitize		×.		removed from the premise of the facility.						
	14	Equip. Condition				,						
ten.	15	Utensil Condition										
)	16	Storage				Nata and in the control of the contr						
Ф	17	Handwashing				Note: continue to work on non-compliance noted on 06/25/2025 inspection report.						
Employee	18	Employee Hygiene										
dwi		Employee Habits										
	t maxim	Food Cert./ Card										
Water	Contract of	Water										
		Cross Con.										
Waste	23	Liquid Waste										
	_	Refuse										
ermin/		Rodents/ Insects										
\ \	26	Animal/ Fowl		5								
	27	Ventilation	Ш									
es	1	Doors			8							
Facilities	29	Floors										
ъ	-	Walls - Ceilings										
	31	Toilet Fac.	Щ									
	32	Janitorial Fac.										
		Lighting										
Misc.	34	Clothing - Linen										
	2	Signs		,								
MA I -	_	Misc.	IIT -	Out	of con	onligance COS - Corrected on site						
Receive			01 =	Out 0	n COII	ppliance COS = Corrected on-site Received by (Signature): Date:						
		Eric Sto	tt			07/11/2025						
REHS (Print): Chalyn Dewe	ey -			REHS (Signature): Phone: 530-841-2112						

Facility Name:	Miner Street Meat Market	
	The marked items represent Health Code violations and must be corrected as follows:	
18		
	š.	
Received By (Print):	Received by (Signature): Date:	7/11/2025
REHS (Print):	REHS (Signature): Phone:	petrel er terlenthalt och statutetra

530-841-2112

Chalyn Dewey

Facility Name:	Miner Street Meat Market	
	The marked items represent Health Code violations and must be corrected as follows:	
18		
	· ·	
Received By (Print): Eric	Received by (Signature): Dat Stott	e: 07/11/2025
REHS (Print):	REHS (Signature):	
Chalyn	Dewey 5	30-841-2112

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Descripted Description	Descrived by (Cignature):	nto:
	c Stott	ate: 07/11/2025
REHS (Print): Chalyn [REHS (Signature): Pr	none: 530-841-2112