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: Penny's D	iner			Permit # 000371			
Addres	SS:	Activities and the control of the co		., Dı	ınsm	nuir, CA 96025			
Permit Holder: Penny's Diner Corp Phono: Phono: Permit To Operate: Valid Not Valid									
530-235-4100 JAMES.GHIOTTO @LODGINGENTERPRISE.COM									
Food Safety Certified Employee: Breanna Merkel Expiration Date: 12/2028									
			-	_	cos	The marked items represent Health Code violations and must be corrected as follows:			
p.	1	Food Temp.		X	X	ROUTINE INSPECTION CONDUCTED THIS DATE			
Lem	2	Prep./ Service				ROUTINE INCITED TO CONDUCTED THIS DATE			
le/]	3	Storage/ Disp.				1) Observed numerous foods stored in the walk-in refrigerator held between 44-69			
See Misc. Facilities Vermin Waste Water Employee Uten./Equip. Food Storage Protection Time/ Temp.	4	Frozen Food				degrees F. Hold all cold food @ 41 degrees F or colder. Dairy may be held @ 45F. All out of temperature food voluntarily discarded.			
	5	Pure Food							
	6	Reused Food				9) Observed refrigeration unit unable to hold proper temperature. The outside			
	7	Transportation				thermometer reads 70 degrees F and internal measurements revealed temperatures			
Φ	8	Storage Fac.				around 68 degrees F. Facility was aware of the equipment failure and contacted a			
orag	9	Refrig. Units		X		repair company earlier this morning. However, at the time of this inspection the unit had			
Sto	10	Thermometer	8			not been repaired and resulted in the above noted food temperature violation. Discontinue using this refrigerator until repaired.			
-000	11	Hazardous Mat.		X	X	Discontinue using this reingerator until repaired.			
	12	Spoils	8			11) Observed a unlabeled spray bottle containing a chemical portioned from bulk.			
dir.	2000	Wash/ Sanitize	2	X	X	Ensure to label all chemicals. Corrected during inspection.			
Second Storage Mater Employee Uten./Equip. Food Storage Protection Time/ Temp.	14	Equip. Condition				42) Observed a social consistency of the cities and the feed account to the cities and the cities			
	15	Utensil Condition				13) Observed a working wiping cloth sitting on the food preparation counter. Store working wiping cloths in a sanitizing solution when not in use. Otherwise, wiping cloths			
	16	Storage				used to wipe counters are required to be placed in the dirty linen after a single use.			
Ф	17	Handwashing		X		Corrected during inspection. 2ND NOTICE			
loye	18	Employee Hygiene				0000000000000000000000000000000000000			
-mp		Employee Habits				13) Observed Sani-buckets in use with 0 ppm sanitizer. Maintain sanitizer solution of			
	7	Food Cert./ Card				200 ppm Quat or 100 ppm Chlorine at all times. Utilize test strips to monitor the concentration of the solution. Testing the sanitizer from the dispenser revealed that the			
Vermin Waste Water Employee Uten./Equip.		Water				proper concentration of Quat is provided. This indicates that the sanitizer solution was			
	_	Cross Con.				most likely not fresh and unable to properly provide a concentration of Quat necessary			
		Liquid Waste				for the disinfection of surfaces. Corrected during inspection.			
>		Refuse				10.01			
rmin	To the same	Rodents/ Insects	_			13) Observed the water turned off to the ice cream well. The staff indicated that they use fresh and clean scoops to dispense ice cream in lieu of utilizing the ice cream well.			
Ve		Animal/ Fowl			8	The scoops were observed to be placed in the ice cream well basin, but the bottom of			
		Ventilation	ш			the basin was soiled with food. If clean utensils are only used to dispense ice cream,			
es	3 2	Doors	\vdash		9	then ensure that they are stored in a manner to prevent contamination. Wash, rinse,			
ciliti		Floors				and sanitize scoops before use. Corrected during inspection.			
Fa		Walls - Ceilings	\Box			17) Observed no soap available for handwashing in the dispenser located in the			
		Toilet Fac.	ш			bathroom. Ensure that hot water, soap in a dispenser, and single-use paper towels are			
		Janitorial Fac.	Н	1		available for use at every handwashing station at all times.			
		Lighting							
Misc.		Clothing - Linen							
	0370	Signs			-				
MA I -		Misc.	NIT -	Out	of con	pliance COS - Corrected on site			
			- 100	Out (n coll	ppliance COS = Corrected on-site Received by (Signature): Date:			
	Received By (Print): Received by (Signature): Date: Breanna Merkel 07/14/2025								
REHS (Print): REHS (Signature): Phone: 530-841-2114									

Page 1 Last modified 4/12/2023

Facility Name:	Penny's Diner	
	The marked items represent Health Code violations and must be correct	ted as follows:
	Š	
Received By (Print):	Received by (Signature):	Date:
REHS (Print):	eanna Merkel REHS (Signature):	07/14/2025 Phone:

530-841-2114

Rick Florendo

Facility Name:	Penny's Diner	
	The marked items represent Health Code violations and must be corrected as follows:	
*		
Descripted Description	Received by (Signature): Date:	
Received By (Print): Brea		7/14/2025
REHS (Print):	REHS (Signature): Phone	A CONTRACTOR OF THE CONTRACTOR

530-841-2114

Rick Florendo

Facility Name:	Penny's Diner					
The marked items represent Health Code violations and must be corrected as follows:						
i¥						
	· ·					
Received By (Print):	Received by (Signature):	Date:				
	eanna Merkel	07/14/2025				
REHS (Print):	REHS (Signature):	Phone:				
Rick Flor	prendo	530-841-2114				

530-841-2114