



# 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: <b>Mehar Subs</b>				Permit # <b>000443</b>		
Address: <b>113 E Miner St, Yreka CA 96097</b>						
Permit Holder: <b>Mehar Subs Inc./Sikander Virk</b>				Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid		
Phone: <b>530-643-8032</b>		E-mail: <b>sikandervirk1989@gmail.com</b>				
Food Safety Certified Employee: <b>Armaan S. Sandhu</b>				Expiration Date: <b>11/2029</b>		
		MAJ	OUT	COS	<p style="text-align: center;">The marked items represent Health Code violations and must be corrected as follows:</p> <p style="text-align: center; font-weight: bold; font-size: 1.2em;">COMPLAINT INSPECTION CONDUCTED ON THIS DATE</p> <p>This inspection report is to follow-up on a complaint received regarding consumption of plastic objects in salad bowls. The following observations were found:</p> <p>The issue has been abated. No plastic bowls were observed during inspection. Facility voluntarily discarded all plastic mixing bowls and is currently utilizing stainless steel mixing bowls to chop or mix salad. Continue to utilize equipment that does not allow migration of deleterious substances and resistant to chipping, scratching, scoring, crazing, decomposition, etc.</p>	
Protection Time/ Temp.	1	Food Temp.				
	2	Prep./ Service				
	3	Storage/ Disp.				
	4	Frozen Food				
	5	Pure Food				
	6	Reused Food				
	7	Transportation				
Food Storage	8	Storage Fac.				
	9	Refrig. Units				
	10	Thermometer				
	11	Hazardous Mat.				
	12	Spoils				
Uten./Equip.	13	Wash/ Sanitize				
	14	Equip. Condition				
	15	Utensil Condition				
	16	Storage				
Employee	17	Handwashing				
	18	Employee Hygiene				
	19	Employee Habits				
	20	Food Cert./ Card				
Water	21	Water				
	22	Cross Con.				
Waste	23	Liquid Waste				
	24	Refuse				
Vermin	25	Rodents/ Insects				
	26	Animal/ Fowl				
Facilities	27	Ventilation				
	28	Doors				
	29	Floors				
	30	Walls - Ceilings				
	31	Toilet Fac.				
	32	Janitorial Fac.				
	33	Lighting				
Misc.	34	Clothing - Linen				
	35	Signs				
	36	Misc.				
MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site						
Received By (Print): <b>Mehak Mehak</b>				Received by (Signature): _____ Date: <b>07/22/2025</b>		
REHS (Print): <b>Chalyn Dewey</b>				REHS (Signature): _____ Phone: <b>530-841-2112</b>		

**Facility Name:** Mehar Subs

The marked items represent Health Code violations and must be corrected as follows:

Received By (Print): Mehak Mehak	Received by (Signature):	Date: 07/22/2025
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REHS (Print): Chalyn Dewey	REHS (Signature):	Phone: 530-841-2112
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