



### 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>First and Last Chance Saloon</b>	Permit # <b>000233</b>
Address: <b>14734 Hornbrook Rd., Hornbrook, CA 96044</b>	
Permit Holder: <b>Betty Miller</b>	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: <b>530-475-3338</b>	E-mail: <b>boopandron@aol.com</b>
Food Safety Certified Employee: <b>Betty L. Miller</b>	Expiration Date: <b>11/2029</b>

		MAJ	OUT	COS	
					The marked items represent Health Code violations and must be corrected as follows:
Protection Time/ Temp.	1	Food Temp.			<p style="text-align: center; font-weight: bold; font-size: 1.2em;">ROUTINE INSPECTION CONDUCTED THIS DATE</p> <p>Future non-compliance to repeat violations will result in reinspection fees, an administrative hearing, and/or potential permit revocation.</p> <p>13) 2nd Notice- Observed 10ppm "bleach" spray bottle stored at the bar. Maintain chlorine sanitizer of 100ppm. Utilize test strips to measure sanitizer concentration before use or as needed. Correct immediately.</p> <p>13) Observed facility is using test strips designed for pool and spa to test chlorine sanitizer in spray bottle. These strips only measure up to 10ppm free chlorine. Again, proper allowable chlorine sanitizer is 100ppm. Obtain correct chlorine test strips immediately.</p> <p>17) Observed no single-use paper towels and paper towel dispenser at the handwashing station. Maintain handwash station with single use paper towels in dispenser or a heated -air hand drying device. Correct ASAP.</p>
	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.			
Uten./Equip.	12	Spoils			
	13	Wash/ Sanitize			
	14	Equip. Condition			
Employee	15	Utensil Condition			
	16	Storage			
	17	Handwashing			
Water	18	Employee Hygiene			
	19	Employee Habits			
Waste	20	Food Cert./ Card			
	21	Water			
Vermin	22	Cross Con.			
	23	Liquid Waste			
Facilities	24	Refuse			
	25	Rodents/ Insects			
	26	Animal/ Fowl			
	27	Ventilation	<input type="checkbox"/>		
	28	Doors	<input type="checkbox"/>		
	29	Floors	<input type="checkbox"/>		
	30	Walls - Ceilings	<input type="checkbox"/>		
Misc.	31	Toilet Fac.	<input type="checkbox"/>		
	32	Janitorial Fac.	<input type="checkbox"/>		
	33	Lighting	<input type="checkbox"/>		
	34	Clothing - Linen	<input type="checkbox"/>		
	35	Signs	<input type="checkbox"/>		
	36	Misc.	<input type="checkbox"/>		

MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site	
Received By (Print): <b>Denise Rue</b>	Received by (Signature): _____ Date: <b>08/22/2025</b>
REHS (Print): <b>Chalyn Dewey</b>	REHS (Signature): _____ Phone: <b>530-841-2025</b>

**Facility Name:** First and Last Chance Saloon

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