



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: Berryvale Grocery				Permit # 100108
Address: 305 S Mount Shasta Blvd, Mount Shasta CA 96067				
Permit Holder: T. Doyle, M. Doyle				Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: 530-926-1576 E-mail: crystal@berryvale.com				
Food Safety Certified Employee: Denise Teschner				Expiration Date: 10/2029
				The marked items represent Health Code violations and must be corrected as follows:
Protection Time/ Temp.	1 Food Temp.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ROUTINE INSPECTION CONDUCTED ON THIS DATE 1) Observed foods in the reach-in cooler between 46-49 degrees. Hold all food at 41 degrees F or colder. Dairy products may be held at 45 degrees F or colder. Correct immediately. 2ND NOTICE 1) Observed food held in display cooler ranging from 45- 49 degrees F. Hold all food at 41 degrees F or colder. Correct immediately. 2ND NOTICE 1) Observed cut melons displayed in ice baths but measuring between 42-51 degrees F. Hold all cut melons at 41 degrees F or colder at all times. Correct immediately. 13) Observed no sanitizer in 2 of the 4 buckets used in the deli preparation area. Ensure that sanitizer is maintained at 200 ppm Quat or 100 ppm Chlorine at all times. Utilize test strips to ensure the proper concentration is dispensed. Corrected during inspection. 14) Observed excessive build-up of dirt/dust in hard to reach places throughout the deli. This includes the top of the knife holders. Maintain this facility in a cleanly and serviceable condition at all times. Clean asap
	2 Prep./ Service	<input type="checkbox"/>	<input type="checkbox"/>	
	3 Storage/ Disp.	<input type="checkbox"/>	<input type="checkbox"/>	
	4 Frozen Food	<input type="checkbox"/>	<input type="checkbox"/>	
	5 Pure Food	<input type="checkbox"/>	<input type="checkbox"/>	
	6 Reused Food	<input type="checkbox"/>	<input type="checkbox"/>	
	7 Transportation	<input type="checkbox"/>	<input type="checkbox"/>	
Food Storage	8 Storage Fac.	<input type="checkbox"/>	<input type="checkbox"/>	
	9 Refrig. Units	<input type="checkbox"/>	<input type="checkbox"/>	
	10 Thermometer	<input type="checkbox"/>	<input type="checkbox"/>	
	11 Hazardous Mat.	<input type="checkbox"/>	<input type="checkbox"/>	
	12 Spoils	<input type="checkbox"/>	<input type="checkbox"/>	
	13 Wash/ Sanitize	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Uten./Equip.	14 Equip. Condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	15 Utensil Condition	<input type="checkbox"/>	<input type="checkbox"/>	
	16 Storage	<input type="checkbox"/>	<input type="checkbox"/>	
	17 Handwashing	<input type="checkbox"/>	<input type="checkbox"/>	
Employee	18 Employee Hygiene	<input type="checkbox"/>	<input type="checkbox"/>	
	19 Employee Habits	<input type="checkbox"/>	<input type="checkbox"/>	
	20 Food Cert./ Card	<input type="checkbox"/>	<input type="checkbox"/>	
Water	21 Water	<input type="checkbox"/>	<input type="checkbox"/>	
	22 Cross Con.	<input type="checkbox"/>	<input type="checkbox"/>	
Waste	23 Liquid Waste	<input type="checkbox"/>	<input type="checkbox"/>	
	24 Refuse	<input type="checkbox"/>	<input type="checkbox"/>	
Vermi	25 Rodents/ Insects	<input type="checkbox"/>	<input type="checkbox"/>	
	26 Animal/ Fowl	<input type="checkbox"/>	<input type="checkbox"/>	
Facilities	27 Ventilation	<input type="checkbox"/>	<input type="checkbox"/>	
	28 Doors	<input type="checkbox"/>	<input type="checkbox"/>	
	29 Floors	<input type="checkbox"/>	<input type="checkbox"/>	
	30 Walls - Ceilings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	31 Toilet Fac.	<input type="checkbox"/>	<input type="checkbox"/>	
Misc.	32 Janitorial Fac.	<input type="checkbox"/>	<input type="checkbox"/>	
	33 Lighting	<input type="checkbox"/>	<input type="checkbox"/>	
	34 Clothing - Linen	<input type="checkbox"/>	<input type="checkbox"/>	
35 Signs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
36 Misc.	<input type="checkbox"/>	<input type="checkbox"/>		

MAJ = Major violation OUT = Out of compliance COS = Corrected on-site

Received By (Print): David Bell Received by (Signature): Date: 09/03/2025
REHS (Print): Rick Florendo REHS (Signature): Phone: 530-841-2114

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