



# 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>Linda's Soup Cafe</b>	Permit # <b>000302</b>
Address: <b>1812 Fort Jones Rd, Yreka, CA 96097</b>	
Permit Holder: <b>Linda Greer</b>	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: <b>530-842-5236</b>	E-mail: <b>lindassoupcafe@mail.com</b>
Food Safety Certified Employee: <b>Leah D. Foster</b>	Expiration Date: <b>05/2028</b>

		MAJ	OUT	COS		
					The marked items represent Health Code violations and must be corrected as follows:	
Protection Time/Temp.	1	Food Temp.		X	X	<p style="text-align: center; font-weight: bold; margin-bottom: 10px;">ROUTINE INSPECTION CONDUCTED THIS DATE</p> <p>1) Observed sliced cheese at 59F stored at top deli cooler. Hold dairy food at 45F or colder. Voluntarily discarded.</p> <p>14) Observed dust buildup on the portable fans stored in the main food preparation area. Maintain equipment in a cleanly manner as to prevent contamination to food or surfaces in the facility. Corrected during inspection.</p> <p>29) Observed buildup of slime or mold on the floor sinks at the prep sink and ware washing area. Maintain equipment in a cleanly manner at all times as to not attract or harbor insects or rodents. Corrected during inspection.</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.				
	12	Spoils				
Uten./Equip.	13	Wash/ Sanitize				
	14	Equip. Condition		X	X	
	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		X	X	
	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>Leah Foster</b>	Received by (Signature): _____ Date: <b>09/17/2025</b>
REHS (Print): <b>Chalyn Dewey</b>	REHS (Signature): _____ Phone: <b>530-841-2112</b>

**Facility Name:** Linda's Soup Cafe

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

Received By (Print):  
Leah Foster

Received by (Signature):

Date:  
09/17/2025

REHS (Print):  
Chalyn Dewey

REHS (Signature):

Phone:  
530-841-2112

**Facility Name:** Linda's Soup Cafe

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

Received By (Print):  
Leah Foster

Received by (Signature):

Date:  
09/17/2025

REHS (Print):  
Chalyn Dewey

REHS (Signature):

Phone:  
530-841-2112

**Facility Name:** Linda's Soup Cafe

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

Received By (Print):  
Leah Foster

Received by (Signature):

Date:  
09/17/2025

REHS (Print):  
Chalyn Dewey

REHS (Signature):

Phone:  
530-841-2112