



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: McDonald's #4578- Yreka	Permit # 000320
Address: 1806 Fort Jones Rd. Yreka, CA 96097	
Permit Holder: Daniel Turner	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: 530-842-5179	E-mail: Samantha.Ferguson@mcdbeau.me
Food Safety Certified Employee: Samantha Ferguson	Expiration Date: 09/2027

		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; margin-top: 0;">ROUTINE INSPECTION CONDUCTED THIS DATE</p> <p>3) Observed raw eggs stored next to soft serve ice cream in the walk-in refrigerator. Store raw food below ready-to-eat food or arrange food in a manner to be completely separated. Correct immediately.</p> <p>13) Observed 10ppm-50ppm chlorine (Cl) sanitizer in sani-buckets at the cooks line. Observed between 50ppm-100ppm Cl concentration at the dishwasher. Maintain manual Cl concentration of 100ppm and mechanical Cl concentration of 50ppm. All manual sanitizer concentration were corrected during inspection. Correct dishwasher concentration immediately or use the warewashing sinks to wash and sanitize wares.</p> <p>14) 5th Notice- Observed all 3 pass thru windows lacking self-closing mechanism. The west pass thru window is not in use, but the air curtain is still non-functional or broken. Service opening dimension is 16"x25". <i>Per CRFC 114259.2, ensure pass thru window service opening is equipped with self-closing device. Service openings up to 432 square inch is permitted if equipped with an air curtain.</i> Install self-closing mechanisms to all windows within 30 days. A reinspection fee is assessed for non-compliance. Note: Facility stated new windows with self-closing device were recently ordered.</p> <p>17) Observed the paper towel not dispensing from handwashing station at beverage or dairy station because unit had low battery. Ensure paper towel dispenses from this unit at all times. Correct during inspection.</p> <p>24) 2nd Notice- Observed the lid to grease collection container open. Ensure lid is closed at all times to prevent attraction or harborage of insects, rodents, etc. COS.</p> <p>29) Observed the ice machine plumbed into floor sink without a 1" air gap. Ensure equipment discharges indirectly to floor sink with atleast a 1" air gap above the top level rim. Correct within 30 days.</p> <p>30) Observed holes on the walls and missing baseboards at the mop sink area. Maintain all walls as to be easily cleanable, smooth, durable, and non-porous. Ensure baseboard extends at least 4" up the wall with a minimum 3/8" coved at the juncture of wall and floor. Repair or correct within 90 days.</p> <p>Future non-compliance will result in additional reinspection fees, administrative hearing, and potential permit revocation.</p>
	2	Prep./ Service			
	3	Storage/ Disp.		X	
	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	X	X	
	14	Equip. Condition	X		
	15	Utensil Condition			
Employee	16	Storage			
	17	Handwashing	X	X	
	18	Employee Hygiene			
	19	Employee Habits			
Water	20	Food Cert./ Card			
	21	Water			
	22	Cross Con.			
Waste	23	Liquid Waste			
	24	Refuse	X	X	
Vermin	25	Rodents/ Insects			
	26	Animal/ Fowl			
Facilities	27	Ventilation			
	28	Doors			
	29	Floors		X	
	30	Walls - Ceilings		X	
	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): Jeannie Smith	Received by (Signature): _____ Date: 09/24/2025
REHS (Print): Chalyn Dewey	REHS (Signature): _____ Phone: 530-841-2112

Facility Name: McDonald's #4578- Yreka

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

Received By (Print):
Jeannie Smith

Received by (Signature):

Date:
09/24/2025

REHS (Print):
Chalyn Dewey

REHS (Signature):

Phone:
530-841-2112

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Empty area for listing health code violations and correction details.

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