



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: Smoked Tomato Pie	Permit # 000770
Address: Smoked Tomato Pie, LLC	
Permit Holder: Smoked Tomato Pie, LLC	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: 530-841-7119	E-mail: thefolks@smokedtomatopie.com
Food Safety Certified Employee: Kathleen T. Gerhardt	Expiration Date: 11/2028

		MAJ	OUT	COS	
					The marked items represent Health Code violations and must be corrected as follows:
Protection Time/Temp.	1		X	X	<p style="text-align: center; margin-bottom: 10px;">ROUTINE INSPECTION CONDUCTED ON THIS DATE</p> <p>1) Observed cooked sausage meat measuring between 47F (internal temp)-53F (surface temp) at pizza deli cooler. Hold cold food at 41F or colder and hot food at 135F or hotter. Voluntarily discarded.</p> <p>3) Observed raw eggs stored next to or above ready-to-eat food in the undercounter freezer and walk-in refrigerator. Store raw food below RTE food, on separate shelf, or arranged where cross contamination is prevented. Correct immediately.</p> <p>13) Observed 10ppm chlorine sanitizer at warewashing sink. Proper manual chlorine sanitizer is maintained at 100ppm. Corrected during inspection.</p> <p>11,13) Observed an unlabeled spray bottle placed on the bus cart. Observed 50ppm chlorine sanitizer solution. Ensure all spray bottles are marked/labeled with a common name and maintain disinfectant solution noted above. Utilize test strips to measure concentration as needed. Correct ASAP.</p> <p>13) Observed black slimy mold inside the ice machine or around the ice chute dispenser. Prevent contaminating ice by maintaining equipment in a cleanly manner at all times. All ice were disposed of and the ice compartment was cleaned and sanitized according to manufacturer instruction during inspection.</p>
	2				
	3		X		
	4				
	5				
	6				
	7				
Food Storage	8				
	9				
	10				
	11		X		
	12				
Uten./Equip.	13		X	X	
	14				
	15				
	16				
Employee	17				
	18				
	19				
	20				
Water	21				
	22				
Waste	23				
	24				
Vermin	25				
	26				
Facilities	27				
	28				
	29				
	30				
	31				
	32				
	33				
Misc.	34				
	35				
	36				

MAJ = Major violation OUT = Out of compliance COS = Corrected on-site	
Received By (Print): Sara Beers	Received by (Signature): _____ Date: 10/08/2025
REHS (Print): Chalyn Dewey	REHS (Signature): _____ Phone: 530-841-2112

Facility Name: Smoked Tomato Pie

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Received By (Print):
Sara Beers

Received by (Signature):

Date:
10/08/2025

REHS (Print):
Chalyn Dewey

REHS (Signature):

Phone:
530-841-2112

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REHS (Signature):

Phone:
530-841-2112