



### 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>Baymont Inn &amp; Suites</b>	Permit # <b>000106</b>
Address: <b>148 Moonlit Oaks Dr., Yreka CA 96097</b>	
Permit Holder: <b>Baymont by Wyndam</b>	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: <b>530-841-1300</b>	E-mail: <b>gm@baymontyreka.com</b>
Food Safety Certified Employee:	Expiration Date:

		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;">ROUTINE INSPECTION CONDUCTED THIS DATE</p> <p>3) 2nd Notice- Observed boxes of food stored directly on the ground in the kitchen. Store all foods at least 6" off the floor. Correct ASAP.</p> <p>17) 2nd Notice- Observed an empty paper towel dispenser at the shared handwashing/warewashing station. Ensure single use paper towel is supplied from dispenser at all times. Correct ASAP.</p> <p style="text-align: center; font-weight: bold;">Future non-compliance will result in reinspection fees, an administrative hearing, and potential permit revocation.</p> <p>NOTE: Facility is still a prepackaged food facility with no food preparation.</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			
	14	Equip. Condition			
	15	Utensil Condition			
Employee	16	Storage			
	17	Handwashing		X	
	18	Employee Hygiene			
	19	Employee Habits			
Water	20	Food Cert./ Card			
	21	Water			
Waste	22	Cross Con.			
	23	Liquid Waste			
Vermin	24	Refuse			
	25	Rodents/ Insects			
Facilities	26	Animal/ Fowl			
	27	Ventilation	□		
	28	Doors	□		
	29	Floors	□		
	30	Walls - Ceilings	□		
	31	Toilet Fac.	□		
	32	Janitorial Fac.	□		
Misc.	33	Lighting	□		
	34	Clothing - Linen	□		
	35	Signs	□		
	36	Misc.	□		

MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site	
Received By (Print): <b>Nico Barnes</b>	Received by (Signature): _____ Date: <b>11/20/2025</b>
REHS (Print): <b>Chalyn Dewey</b>	REHS (Signature): _____ Phone: <b>530-841-2112</b>

**Facility Name:** Baymont Inn & Suites

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

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Nico Barnes

Received by (Signature):

Date:  
11/20/2025

REHS (Print):  
Chalyn Dewey

REHS (Signature):

Phone:  
530-841-2112

**Facility Name:** Baymont Inn & Suites

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

[Empty area for listing health code violations and correction details]

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