



Food Program Official Inspection Report
 SISKIYOU COUNTY PUBLIC HEALTH
 & COMMUNITY DEVELOPMENT
 806 S. Main Street
 Yreka, California 96097
 ph: (530) 841-2100, fax: (530) 841-4076

Facility Name: **SHENANIGANZ** CMHC#

Address: **612 S MAIN STREET**

Permit Holder: **AIMEE LANTZ** Permit To Operate:
 Not Valid

Phone: **530-572-1500** E-mail:

Expiration Date:
VINCENT JONES **2025 FOOD HANDLER**

		MAJ	OUT	COS	
Protection Time/ Temp.	1	Food Temp.			ROUTINE INSPECTION CONDUCTED ON THIS DATE.
	2	Prep./ Service			
	3	Storage/ Disp.			
	4	Frozen Food			
	5	Pure Food			
	6	Reused Food			
	7	Transportation			
Food Storage	8	Storage Fac.			ALL FOOD HANDLING IS SATISFACTORY AT PRESENT TIME.
	9	Refrig. Units			
	10	Thermometer			
	11	Hazardous Mat.			
	12	Spoils			
Uten./Equip.	13	Wash/ Sanitize			
	14	Equip. Condition			
	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			
Vermir	25	Rodents/ Insects			
	26	Animal/ Fowl			
Facilities	27	Ventilation			
	28	Doors			
	29	Floors			
	30	Walls Ceilings			
	31	Toilet Fac.			
	32	Janitorial Fac.			
Misc.	33	Lighting			FACILITY IS INSTRUCTED TO OBTAIN FOOD MANAGER CERTIFICATION ASAP.
	34	Clothing - Linen			
	35	Signs			
	36	Misc.			

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

Received By (Print): **BRIAN TAYLOR** Received by (Signature): *Brian Taylor* Date: **9/21/2022**
 REHS (Print): **ZAKIYA RAHH** REHS (Signature): *Zakiya Rahh* Phone: **841-2112**