



**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: <b>WALMART</b>                      | CMHC# <b>100393</b>  |
| Address: <b>1906 FT. JONES RD. YREKA, CA 96097</b> |  |
| Permit Holder: <b>WALMART CO.</b>                  | Permit To Operate:<br><input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid |
| Phone: <b>842-7330</b>                             | E-mail: <b>BAF004T.S01630@STORES.US.WAL-MART.COM</b>   |

Expiration Date:

**MICHAEL MANZONE**

|                        |    | MAJ               | OUT | COS |   |
|------------------------|----|-------------------|-----|-----|---|
| Protection Time/ Temp. | 1  | Food Temp.        |     |     | <b>ROUTINE INSPECTION CONDUCTED ON THIS DATE.</b>     |
|                        | 2  | Prep./ Service    |     |     |   |
|                        | 3  | Storage/ Disp.    |     |     |   |
|                        | 4  | Frozen Food       |     |     |   |
|                        | 5  | Pure Food         |     |     |   |
|                        | 6  | Reused Food       |     |     |   |
|                        | 7  | Transportation    |     |     |   |
| Food Storage           | 8  | Storage Fac.      |     |     | <b>SATISFACTORY AT PRESENT TIME</b>                   |
|                        | 9  | Refrig. Units     |     |     |   |
|                        | 10 | Thermometer       |     |     |   |
|                        | 11 | Hazardous Mat.    |     |     |   |
|                        | 12 | Spoils            |     |     |   |
| Uter./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       |     |     | <b>Note: check dog food aisle on a regular basis.</b> |
|                        | 28 | Doors             |     |     |   |
|                        | 29 | Floors            |     |     |   |
|                        | 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>SUSAN JOHNSON</b> | Received by (Signature): | Date: <b>9/21/2022</b> |
| REHS (Print): <b>ZAKIYA RAHH</b>  | REHS (Signature):                         | Phone: <b>841-2112</b>   |                        |