

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	Facility Name: Taqueria Mi Raza									
Addres		113 W Third S			A 96	5023				
Permit Holder: Taqueria Mi Raza Permit To Ope Valid Valid										
Phone	5	30-397-4034				E-mail:				
Food S		y Certified Employ	ee:			Expiration Date:				
			MAJ	OUT	COS	The marked items represent Health Code violations and must be corrected as follows:				
	1	Food Temp.	1717 10	001	000	ROUTINE REINSPECTION CONDUCTED THIS DATE				
Protection Time/ Temp.	2	Prep./ Service				ROOTINE REINOI ECTION CONDUCTED THIC DATE				
	3	Storage/ Disp.				Observed hot water in the handwashing sink and cold foods being held at 41 F.				
	-	Frozen Food								
	5	Pure Food				NOTE: FOOD FACILITY HAS 60 DAYS FOR FOOD MANAGER CERTIFICATION TO BE PROVIDED.				
	6	Reused Food				PROVIDED.				
	7	Transportation								
4)	8	Storage Fac.								
Food Storage	9	Refrig. Units								
Sto	10	Thermometer								
poo.	11	Hazardous Mat.								
ш	12	Spoils								
Uten./Equip.	13	Wash/ Sanitize								
	14	Equip. Condition								
ten./	15	Utensil Condition								
Ď	16	Storage								
Ф	17	Handwashing								
loye	18	Employee Hygiene								
Employee		Employee Habits								
	_	Food Cert./ Card		X						
#		Water								
>		Cross Con.								
aste		Liquid Waste								
Was	_	Refuse								
Vermin	_	Rodents/ Insects								
Š		Animal/ Fowl								
		Ventilation								
ies		Doors								
Facilities	-	Floors	Н							
Ĭ.		Walls - Ceilings								
	-	Toilet Fac.								
		Janitorial Fac.								
		Lighting	Н							
Misc.		Clothing - Linen	Н							
		Signs Misc.	H							
MAJ =			UT =	Out	of com	apliance COS = Corrected on-site				
		(Print):				Received by (Signature): Date: 5/9/2023				
REHS (Print): Alexa Roche						REHS (Signature): Phone: 530-841-2117				

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	The marked items represent Health Code violations and must be corrected as follows:	
Received By (Print):	Received by (Signature): Date:	5/9/2023
REHS (Print): Alexa Ro	REHS (Signature): Phone che 53	e: 0-841-2117

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