

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: The Wine Bar and Bistro Permit # 629533										
Address: 314 S Broadway Yreka CA 96097										
Permit		^{der:} Brett Dunc	an			Permit To Operate: O Valid O Not Valid				
Phone		530-3401262				E-mail:				
Food Safety Certified Employee: Sunshine Betts Expiration Date:										
				OUT		The marked items represent Health Code violations and must be corrected as follows:				
	1	Food Temp.	1717 (0	001	000	The marked tems represent results dode violations and mast se confedera as follows:				
Protection Time/ Temp.		Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE				
		Storage/ Disp.								
		Frozen Food				8) Observed two jars of jam without labeling. Ensure foods are from an approved source				
	5	Pure Food								
	6	Reused Food				with labeling. Removed voluntarily.				
Pro	7	Transportation								
	8	Storage Fac.		X						
age.	9	Refrig. Units				13) Observed buildup in the ice machine. Wash and sanitize ice machine as soon as				
Stor	10	Thermometer				possible.				
Food Storage	11	Hazardous Mat.								
ш	12	Spoils								
ġ	13	Wash/ Sanitize		X		NOTE: KEEP FOOD FACILITY PERMIT AND FOOD MANAGER CERTIFICATION				
Uten./Equip.	14	Equip. Condition				ONSITE.				
en./	15	Utensil Condition								
ゔ	16	Storage								
Φ	17	Handwashing								
Employee	18	Employee Hygiene								
ld Li	19	Employee Habits								
Ш	20	Food Cert./ Card								
Water	21	Water								
Š		Cross Con.								
Waste	_	Liquid Waste								
		Refuse								
Vermin		Rodents/ Insects								
\ 	_	Animal/ Fowl								
		Ventilation	ш							
es		Doors	Ш							
Facilities		Floors								
Б		Walls - Ceilings								
		Toilet Fac.	Н							
	32	Janitorial Fac.								
		Lighting	Н							
Misc.		Clothing - Linen								
Σ		Signs	H							
MA.I =		Misc. or violation C)UT =	Out	of com	apliance COS = Corrected on-site				
		/ (Print):				Received by (Signature). Date:				
		Sunshir	ne Bo	etts		5/16/2023				
REHS (Print): Phone: 530-841-2117										
Page 1 Last modified 4/12/202										

Facility Name: The Wine Ba	ar and Bistro	
The market	d items represent Health Code violations and must be co	rrected as follows:
Received By (Print): Sunshine Betts	Received by (Signature):	Date: 5/16/2023
REHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

Facility Name:	The Wine Bar and Bistro	
	The marked items represent Health Code violations and must be corre	cted as follows:
•		
Received By (Print):	Received by (Signature):	Date:
	shine Betts	5/16/2023
RFHS (Print)	REHS (Signature):	Phone:

530-841-2117

Álexa Roche

Facility Name:	The Wine Bar and Bistro	
	The marked items represent Health Code violations and must be cor	rrected as follows:
	·	
Received By (Print):	Received by (Signature):	Date:
Suns	Shine Betts REHS (Signature):	5/16/2023

530-841-2117

Alexa Roche