## 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

Facilit	y Na	<sup>me:</sup> Shasta Va	le Ra	anch CF	D-B	Permit # 0101	4	
Addre	SS:	11811 Big Spr	ings	Rd Mont	ague 96094			
Permi		<b>.</b> .	-		•	Permit To Opera Valid O	ate: Not Valid	
Phone	e: p	530-514-1453			E-mail: cowboss@shastaval			
Food		ty Certified Employ	vee:			Expiration Date:		
		, ,						
	1	Food Temp.	MAJ	OUT COS	The marked items represent Health Code vie		llows:	
amp.		Prep./ Service			PRE-OPENING INSPECTION	CONDUCTED ON THIS DATE		
a∕ Te	-	Storage/ Disp.			This CFO is approved to begin operation. Please of	obtain any permits and licenses	from all	
Lime		Frozen Food			necessary authorities.			
ion	-	Pure Food						
Protection Time/ Temp.		Reused Food						
Pro		Transportation						
-		Storage Fac.						
rage	9	Refrig. Units						
Stol	10	Thermometer						
ip. Food Storage	11	Hazardous Mat.						
	12	Spoils						
	13	Wash/ Sanitize						
/Equ	14	Equip. Condition						
Uten./Equip.	15	Utensil Condition						
Ď	16	Storage						
18 19 20	17	Handwashing						
	Employee Hygiene							
	-	Employee Habits						
		Food Cert./ Card						
Water	-	Water						
ک ۵		Cross Con.						
Waste	-	Liquid Waste Refuse						
<u>ح</u>		Rodents/ Insects						
'ermin	_	Animal/ Fowl						
>								
	-	Doors						
Facilities	-	Floors						
acil	-	Walls - Ceilings						
	-	Toilet Fac.						
	32	Janitorial Fac.						
	33	Lighting						
പ	1	Clothing - Linen						
Misc.	35	Signs						
		Misc.						
			)UT =	Out of cor				
Receiv	ed By	y (Print): Lindsay	Pap	pas	Received by (Signature):	Date: 8/10/20	23	
REHS	(Print	<sup>i):</sup> Alexa Roche	9		REHS (Signature):	Phone: 530-84	1-2117	

Facility Name: Shasta Vale Ranch CFO-B

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

Ľ

Received By (Print): Lindsay Pappas	Received by (Signature):	Date: 8/10/2023
REHS (Print): Alexa Roche	REHS (Signature):	Phone: 530-841-2117
Page 2		

Facility Name:	Shasta Vale Ranch CFO-B
----------------	-------------------------

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

.

Received By (Print): Lindsay Pappas	Received by (Signature):	Date: 8/10/2023
REHS (Print): Alexa Roche	REHS (Signature):	Phone: 530-841-2117
Page 3		

Facility Name:	Shasta Vale Ranch CFO-B
----------------	-------------------------

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

.

Received By (Print): Lindsay Pappas	Received by (Signature):	Date: 8/10/2023
REHS (Print): Alexa Roche	REHS (Signature):	Phone: 530-841-2117