

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: Sojourn Coffee Permit # 000182						000182					
Addres	SS:	207 South Qu			2116	McCloud (^Δ 96057				000.02
Permit			anicy	Avei	iue,	Wicciouu, V	SK 30031			Permit To	Operate:
		Chad and	Julie	Maj	or					Valid	O Not Valid
Phone	: 5	530-925-9116					E-ma	i: mccloudoutdoors@	gmail.com		
Food Safety Certified Employee: Catherine Stallings							Expiration	Date: 11/2028			
				OUT		Otallings	The marked ite	ms represent Health Code vi	iolations and mus	t he corrected	
o.	1	Food Temp.	1017.00	001	000			·			i do followo.
emp	_	Prep./ Service					ROUTIN	E INSPECTION COND	JUCTED THIS	DATE	
Je/ T	3	Storage/ Disp.									
Protection Time/ Temp.	4	Frozen Food				Satisfactory at Present Time					
	5	Pure Food									
	6	Reused Food									
	7	Transportation									
Food Storage	8	Storage Fac.									
	9	Refrig. Units									
	10	Thermometer									
	-	Hazardous Mat.									
	12	Spoils									
Uten./Equip.		Wash/ Sanitize	-								
		Equip. Condition									
Jten	-	Utensil Condition									
	-	Storage									
ee/	-	Handwashing Employee Hygiene									
Employee											
Εu		Employee Habits Food Cert./ Card	+								
ē		Water									
Water	_	Cross Con.									
ste	23	Liquid Waste									
Waste	-	Refuse									
Vermin	25	Rodents/ Insects									
Veri	26	Animal/ Fowl									
	27	Ventilation									
SS	28	Doors									
Facilities	29	Floors									
Fас	30	Walls - Ceilings									
	31	Toilet Fac.									
		Janitorial Fac.	ш								
Misc.		Lighting									
		Clothing - Linen									
		Signs	\blacksquare								
ΜΑΙ		Misc. or violation	OUT :	Out	of cor	nliance	COS - Carracta	d on-site			
		/ (Print):				npliance	COS = Corrected Received by (Sign			Date:	
	,	Cather	ine St	tallin	gs		7 (- 3.	•			/04/2023
REHS (Print): Rick Floren	do				REHS (Signature):		Phone:	30-841-2114

Facility Name: Sojourn Coffee	Sojourn Coffee									
The marked items	represent Health Code violations and must be co	orrected as follows:								
•										
Received By (Print):	Received by (Signature):	Date:								
Catherine Stallings		12/04/2023								
REHS (Print):	REHS (Signature):	Phone:								

530-841-2114

Rick Florendo

Facility Name:	Sojourn Coffee	
	The marked items represent Health Code violations and must be corrected as follow	vs:
	•	
Received By (Print):	Received by (Signature):	Date:
	nerine Stallings	12/04/2023
REHS (Print):	REHS (Signature):	Phone:

530-841-2114

Rick Florendo

Facility Name:	Sojourn Coffee		
	The marked items re	present Health Code violations and must be	e corrected as follows:
		D 1 11 (0)	_
	nerine Stallings	Received by (Signature):	Date: 12/04/2023
REHS (Print): Rick Flor	rendo	REHS (Signature):	Phone: 530-841-2114