

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: Handy Stop - Patriot Permit # 000433									
Addres	ss:	25 N Weed Blv	/d W	/eed	CA					
Permit Holder: Margaret Dean Permit To Operate: O Not Valid										
Phone	:	530-938-3090				E-mail: dgrafton@sisdevco.com				
Food S	Safe	ty Certified Employ	ee:			Expiration Date:				
MAJ OUT COS The marked items represent Health Code violations and must be corrected as follows:										
Protection Time/ Temp.	1	Food Temp.		X	X	ROUTINE INSPECTION CONDUCTED ON THIS DATE				
	2	Prep./ Service				TROUTING ESTION SONDOTED ON THIS BATE				
	3	Storage/ Disp.				1) Observed cooked chicken in the warmer at 111 F. Keep hot foods at 135 F or hotter. Corrected	l			
	4	Frozen Food				on-site.				
	5	Pure Food				20) Obtain Food Manager certification within the next 60 days.				
otec	6	Reused Food				20) Obtain 1 ood Ivianager Cerunication within the flext oo days.				
Pro	7	Transportation								
Food Storage	8	Storage Fac.								
	9	Refrig. Units								
	10	Thermometer								
000	11	Hazardous Mat.								
4	12	Spoils								
iip.	13	Wash/ Sanitize								
Uten./Equip.	14	Equip. Condition								
ten./	15	Utensil Condition								
ın	16	Storage								
ē	17	Handwashing								
loye	18	Employee Hygiene								
Employee	19	Employee Habits								
	20	Food Cert./ Card		×						
Water		Water								
×	22	Cross Con.								
Waste	-	Liquid Waste								
×		Refuse								
Vermin	_	Rodents/ Insects								
Ve	26	Animal/ Fowl								
	-	Ventilation	ш							
es	_	Doors	Ш							
Facilities		Floors								
Б		Walls - Ceilings								
		Toilet Fac.								
	_	Janitorial Fac.	Щ							
		Lighting								
Misc.		Clothing - Linen								
		Signs								
ΜΔΙ		Misc.	IIIT -	. Out /	of cor	anliance COS - Corrected on-site				
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site Received By (Print): Received by (Signature): Date:										
Derek Grafton 1/11/2024										
REHS (Print): REHS (Signature): Phone: Alexa Roche 530-841-2117										

Facility Name:	Handy Stop - Patriot		
	The marked items re	present Health Code violations and must b	e corrected as follows:
	erek Grafton	Received by (Signature):	Date: 1/11/2024
REHS (Print): Alexa Ro	che	REHS (Signature):	Phone: 530-841-2117

Facility Name:	Handy Stop - Patriot	
	The marked items represent Health Code violations and must be corrected as follows:	ws:
•		
Received By (Print):	Received by (Signature):	Date:
Dere	ek Grafton	1/11/2024
RFHS (Print)	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

Facility Name:	Handy Stop - Patriot	
	The marked items represent Health Code violations and	must be corrected as follows:
Received By (Print):	Received by (Signature):	Date:
REHS (Print):	ek Grafton REHS (Signature):	1/11/2024 Phone:

530-841-2117

Alexa Roche