



### 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: <b>Tacos Tao Catering</b>              | Permit # <b>000791</b>   |
| Address: <b>108 W Oberlin Yreka CA 96097</b>          |  |
| Permit Holder: <b>Samantha Perez</b>                  | Permit To Operate:<br><input checked="" type="radio"/> Valid <input type="radio"/> Not Valid |
| Phone: <b>408-680-6425</b>                            | E-mail: <b>perezfamilyx4@gmail.com</b>   |
| Food Safety Certified Employee: <b>Samantha Perez</b> | Expiration Date: <b>04/2029</b>  |

|                        |    | MAJ               | OUT | COS |   |
|------------------------|----|-------------------|-----|-----|---|
|                        |    |                   |     |     | The marked items represent Health Code violations and must be corrected as follows:   |
| Protection Time/ Temp. | 1  | Food Temp.        |     |     | <p style="text-align: center; font-weight: bold; margin-bottom: 20px;">ROUTINE INSPECTION CONDUCTED ON THIS DATE</p> <p>13) Observed no paper towel in the dispenser at the handwashing station. Maintain a constant supply of single use paper towel, warm water, and pump soap at all times. Correct immediately.</p> <p>14) Observed tape along the door to the stand up freezer. Maintain unit to be easily cleanable, smooth, durable, and nonabsorbent. Repair or replace within 90 days.</p> |
|                        | 2  | Prep./ Service    |     |     |   |
|                        | 3  | Storage/ Disp.    |     |     |   |
|                        | 4  | Frozen Food       |     |     |   |
|                        | 5  | Pure Food         |     |     |   |
|                        | 6  | Reused Food       |     |     |   |
|                        | 7  | Transportation    |     |     |   |
| Food Storage           | 8  | Storage Fac.      |     |     |   |
|                        | 9  | Refrig. Units     |     |     |   |
|                        | 10 | Thermometer       |     |     |   |
|                        | 11 | Hazardous Mat.    |     |     |   |
|                        | 12 | Spoils            |     |     |   |
| Uten./Equip.           | 13 | Wash/ Sanitize    |     | X   |   |
|                        | 14 | Equip. Condition  |     | X   |   |
|                        | 15 | Utensil Condition |     |     |   |
|                        | 16 | Storage           |     |     |   |
| Employee               | 17 | Handwashing       |     |     |   |
|                        | 18 | Employee Hygiene  |     |     |   |
|                        | 19 | Employee Habits   |     |     |   |
|                        | 20 | Food Cert./ Card  |     |     |   |
| Water                  | 21 | Water             |     |     |   |
|                        | 22 | Cross Con.        |     |     |   |
| Waste                  | 23 | Liquid Waste      |     |     |   |
|                        | 24 | Refuse            |     |     |   |
| Vermin                 | 25 | Rodents/ Insects  |     |     |   |
|                        | 26 | Animal/ Fowl      |     |     |   |
| Facilities             | 27 | Ventilation       |     |     |   |
|                        | 28 | Doors             |     |     |   |
|                        | 29 | Floors            |     |     |   |
|                        | 30 | Walls - Ceilings  |     |     |   |
|                        | 31 | Toilet Fac.       |     |     |   |
|                        | 32 | Janitorial Fac.   |     |     |   |
|                        | 33 | Lighting          |     |     |   |
| Misc.                  | 34 | Clothing - Linen  |     |     |   |
|                        | 35 | Signs             |     |     |   |
|                        | 36 | Misc.             |     |     |   |

|   |
|---|
| MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site                           |
| Received By (Print): <b>Samantha Perez</b> Received by (Signature): _____      Date: <b>1/12/2024</b> |
| REHS (Print): <b>Chalyn Dewey</b> REHS (Signature): _____      Phone: <b>530-841-2112</b>             |

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Received by (Signature):

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1/12/2024

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