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	/ Na	^{me:} Linda's Sc	oup C	afe		Permit # 000302						
Addres	ss:	1812 Fort Jone	es Ro	d, Yr	eka	CA 96097						
Permit	Hol	^{der:} Linda Gree	er			Permit To Operate: Valid O Not Valid						
Phone	: [530-842-5236				E-mail: N/A						
Food S		ty Certified Employ	/ee: _I	indo	Gre	Funivation Date:						
Protection Time/ Temp.	1	Food Temp.	MAJ	OUT	COS	The marked items represent Health Code violations and must be corrected as follows:						
		Prep./ Service										
		Storage/ Disp.				ROUTINE INSPECTION CONDUCTED ON THIS DATE						
		Frozen Food										
		Pure Food				14) Observed rust buildup on one of the shelves in the walk-in refrigerator. Ensure						
		Reused Food				equipment to be smooth, easily cleanable, nonabsorbent, and durable. Correct						
Pro	\vdash	Transportation				immediately.						
	-	Storage Fac.										
		Refrig. Units				14) Observed cracks to the finishes on the ceilings of the walk-in refrigerator. Maintain						
		Thermometer				the surface to be easily cleanable, smooth, nonabsorbent, and durable. Correct immediately.						
		Hazardous Mat.										
		Spoils				14) Observed food being portioned next to bare wood surfaces. Ensure surfaces within						
Iten./Equip.		Wash/ Sanitize				the food prep area is nonporous, easily cleanable, smooth, and durable. Correct asap.						
		Equip. Condition		X								
'n./E		Utensil Condition		,,								
Ųŧ	-	Storage										
4)		Handwashing										
Employee	_	Employee Hygiene										
mpk	19	Employee Habits										
ш	20	Food Cert./ Card										
ter	21	Water										
Water	22	Cross Con.										
Waste Wa	23	Liquid Waste										
Wa	24	Refuse										
Vermin	25	Rodents/ Insects										
Ver	26	Animal/ Fowl										
	27	Ventilation										
တ္သ	28	Doors										
-acilities	29	Floors										
Fa	30	Walls - Ceilings										
	31	Toilet Fac.										
	32	Janitorial Fac.										
		Lighting										
SC.	34	Clothing - Linen	ш									
Misc.	35	Signs	Щ									
N40 '		Misc.		0. 1		Talliance COC Computed on site						
			JUI =	Out o	or con	npliance COS = Corrected on-site Received by (Signature): Date:						
Received By (Print): Received by (Signature): Date: Leah Foster 01/26/2024												
REHS (Print): Chalyn Dewey					REHS (Signature): Phone: 530-841-2112							

Facility Name:	Linda's Soup Cafe	
	The marked items represent Health Code violations and must be corrected as follows:	
Received By (Print):	Received by (Signature): Date: ah Foster	01/26/2024
REHS (Print):	REHS (Signature): Phone	
Chalyn D	Dewey 530)-841-2112

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