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

Shenaniganz Eat Drink Play Shenaniganz Eat Drink Play											
Address: 612 S Main St Yreka CA 96097											
Permit Holder: Aimee Lantz Permit To Operate: O Valid Not Valid											
Phone: 530-572-1500 E-mail: shenaniganz.eat.drink.play@gmail.com											
Food Safety Certified Employee: Aimee Lantz Expiration Date: 10/2028											
MAJ OUT COS The marked items represent Health Code violations and must be corrected as follows:											
á	1	Food Temp.			DOUTING INODESTIC	AN CONDUCTED ON THIS DATE					
Protection Time/ Temp.	2	Prep./ Service			ROUTINE INSPECTIC	N CONDUCTED ON THIS DATE					
	3	Storage/ Disp.			9) Observed liquid dripping off the condenser into a 6" pan in the walk-in refrigerator.						
	4	Frozen Food									
	5	Pure Food			The pan is half filled with ice and liquid. Remo						
	6	Reused Food			against contamination intil unit has been repaired. Repair or replace within 90 days.						
Ā	7	Transportation			11) Observed numerous unmarked or unlabe	led working spray bottles throughout the					
Food Storage	8	Storage Fac.			11) Observed numerous unmarked or unlabeled working spray bottles throughou facility. Ensure all working bottles are labeled to prevent mishandling of hazardou						
	9	Refrig. Units		X	materials. Correct immediately.	·					
	10	Thermometer			44) 01 - 1111 - 1111 - 0 111 - 1						
		Hazardous Mat.		X	14) Observed "Household Use Only" standup processor. All equipment shall be ANSI/NSF						
	12	Spoils			replace equipment within 90 days. Provide cu						
Uten./Equip.	13	Wash/ Sanitize			purchase for preapproval.	aropos chock or equipment prior to					
	14	Equip. Condition		X	<u> </u>						
ten.		Utensil Condition			16) Observed exposed wood shelving for the						
\supset	-	Storage		X	the cabinet below the cook's line and above to smooth, durable, nonabsorbent, and cleanable						
e 0	_	Handwashing		X	next 30 days.	le. Repair of replace shelving within the					
Employee		Employee Hygiene			- How do days:						
Emp		Employee Habits			17) Observed no paper towel in the dispense						
	\vdash	Food Cert./ Card			to front entrance). Maintain a constant supply						
Water		Water			paper towel in the dispenser at each handwa	shing sinks at all times. Correct asap.					
	_	Cross Con.			29) Observed buildup of grease, dirt, and foo	d debris in hard to reach areas (behind or					
Waste	-	Liquid Waste			in between cracks at range, behind prep table						
<u> </u>	_	Refuse			facility in a clean manner at all times. Correct						
Vermin		Rodents/ Insects									
Š		Animal/ Fowl			33) Observed no lighting source underneath t						
		Ventilation	Н		prepared requires at least 50 foot light candle source above the cooking range within 90 da						
ies		Doors	Н	~	- Source above the secreting range within so day	, o.					
-acilities		Floors	Н	X	\dashv						
щ		Walls - Ceilings	Н		\dashv						
		Toilet Fac.	Н		\dashv						
		Janitorial Fac.	Н	<u> </u>							
		Lighting Lines	Н	X	\dashv						
Misc.		Clothing - Linen			⊣						
Ž		Signs	H		Note: Equipment and Utensils form handed o	ut.					
36 Misc.											
Received By (Print): Adrea Sullenger Received by (Signature): Date: 02/14/2024											
REHS (Print): REHS (Signature): Phone: Chalyn Dewey 530-841-2112											

Facility Name:	Shenaniganz Eat Drink Play	
	The marked items represent Health Code violations and must be corrected as follows	:
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Received By (Print):		Date:
	Irea Sullenger	02/14/2024
REHS (Print): Chalyn D	REHS (Signature): F	Phone: 530-841-2112

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Received By (Print):	Received by (Signature):	Date:				
Adre	ea Sullenger	02/14/2024				
REHS (Print):	REHS (Signature):	Phone:				
Chalyn [Dewey	530-841-2112				

Facility Name:	Shenaniganz Eat Drink Play						
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Received By (Print):	Doggiu	ed by (Signature):	Date:				
Adr	ea Sullenger		02/14/2024				
REHS (Print): Chalyn [REHS Dewey	(Signature):	Phone: 530-841-2112				