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: Gazelle Elementary Permit # 000243							oit # 000243	
Addres	SS:	25305 Gazelle	- Callah	an Rd	, Gazelle CA	A 96034		
Permit	Hol	^{der:} Gazelle Ele		nit To Operate: lid Not Valid				
Phone: 530-435-2321 E-mail: twilson@gazaelle.k12.ca.us								
Food Safety Certified Employee: Thomas Wilson Expiration Date: 06/202								
				JT COS		The marked items represent Health Code violations and must be corr		
Protection Time/ Temp.	1	Food Temp.				ROUTINE INSPECTION CONDUCTED ON		
	2	Prep./ Service						
. /eu	3	Storage/ Disp.				Outline for the second of the second time of		
Ţ	4	Frozen Food				Satisfactory at present time		
ction	5	Pure Food						
rote	6	Reused Food	$\perp \perp$					
Δ.	7	Transportation	<u> </u>					
Э	_	Storage Fac.	\bot					
Food Storage	_	Refrig. Units	 					
		Thermometer	++					
	$\overline{}$	Hazardous Mat.	++					
		Spoils	++	 				
luip.	_	Wash/ Sanitize	++	$+\!-\!\!\!-$				
Uten./Equip.		Equip. Condition	++	$+\!-\!\!\!-$				
Uter	$\overline{}$	Utensil Condition	++	$+\!-\!\!\!-$				
		Storage	++	$+\!-\!\!\!-$				
yee		Handwashing Employee Hygiene	+	+				
Employee	-	Employee Habits	++	+				
Ēπ		Food Cert./ Card	+	+				
ē	_	Water	+	+				
Water		Cross Con.	1	+				
	23	Liquid Waste		\top				
Vermin Waste	24	Refuse						
min	25	Rodents/ Insects						
Ver	26	Animal/ Fowl						
	27	Ventilation						
S	28	Doors						
Facilities	29	Floors						
Fac	30	Walls - Ceilings						
		Toilet Fac.						
		Janitorial Fac.	Щ					
		Lighting						
Misc.		Clothing - Linen						
Ξ		Signs						
- 4 ^ 1		Misc.		11/222	V	000 0 000 100 000		
	MAJ = Major violation OUT = Out of compliance COS = Corrected on-site Received By (Print): Received by (Signature): Date:							
		Robin N	Velson				2/28/2024	
REHS (Print	:): Alexa Roche	е			REHS (Signature): Phon	530841-2117	

Facility Name:	Gazelle Elementary	
	The marked items represent Health Code violations and mu	ust be corrected as follows:
Received By (Print):	Received by (Signature):	Date:
Ro	obin Nelson	2/28/2024
REHS (Print):	REHS (Signature):	Phone:

530841-2117

Alexa Roche

Facility Name:	Gazelle Elementary	
	The marked items represent Health Code violations and must be corre	ected as follows:
	v.	
Received By (Print): Rob	Received by (Signature): in Nelson	Date: 2/28/2024
REHS (Print):	REHS (Signature):	Phone:

530841-2117

Alexa Roche

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530841-2117