

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: Golden Rush Espresso Permit # 000245									
Addres	ss:	827 S Main St	reet,	Yrek	ka C/	A 96097			
Permit Holder: Mark and Kris Zeigler Permit To Operate: O Valid Not Valid									
Phone		530-842-9901				E-mail: goldenrushespresso@gmail.com			
Food Safety Certified Employee: Kris Zeigler Expiration Date: 09/2024									
			MAJ		-	The marked items represent Health Code violations and must be corrected as follows:			
Protection Time/ Temp.	1	Food Temp.	1717 10	001	000	The marked kerne represent theath essee theather and make be semistred as follows.			
	2	Prep./ Service				DOLITING INODESTION CONDUCTED ON THIS DATE			
	3	Storage/ Disp.				ROUTINE INSPECTION CONDUCTED ON THIS DATE			
	4	Frozen Food							
tion	5	Pure Food				13) Observed greater than 200ppm chlorine sanitizer in a spray bottle. Ensure the			
tect	6	Reused Food				concentration of chlorine measures at 100ppm for manual sanitization. Correct asap.			
Pro	7	Transportation				OO) Observed as a first last of the control of the			
	8	Storage Fac.				30) Observed pass-thru windows without a self-closing mechanism. Equip each past thru windows with a self-closing device. Repair or correct within 90 days.			
гаде	9	Refrig. Units				that windows with a self-closing device. Repair of correct within 90 days.			
Stol	10	Thermometer							
Food Storage	11	Hazardous Mat.							
ц	12	Spoils							
ď	13	Wash/ Sanitize		X					
Equi	14	Equip. Condition							
Uten./Equip.	15	Utensil Condition							
Ť	16	Storage							
d)	17	Handwashing							
oye	18	Employee Hygiene							
Employee	19	Employee Habits							
3	20	Food Cert./ Card							
Water	21	Water							
	22	Cross Con.							
Waste	23	Liquid Waste							
Me	24	Refuse							
Vermin	25	Rodents/ Insects							
Ver	26	Animal/ Fowl							
	27	Ventilation							
Se	28	Doors							
Facilities	29	Floors							
Fa	30	Walls - Ceilings		X					
	31	Toilet Fac.	Ш						
	32	Janitorial Fac.	ш						
		Lighting	ш						
SC	34	Clothing - Linen							
		Signs							
N / A		Misc.		Ot	of com	pliance COS - Corrected an aita			
			JU I =	Out C	n con	pliance COS = Corrected on-site Received by (Signature): Date:			
Kris Zeigler 02/28/2024									
REHS (Print): REHS (Signature): Chalyn Dewey						REHS (Signature): Phone: 530-841-2112			

Facility Name:	Golden Rush Espresso						
	The marked items re	present Health Code violations and must be	corrected as follows:				
Received By (Print):		Received by (Signature):	Date:				
Kris	s Zeigler	,, ,	02/28/2024				
REHS (Print):		REHS (Signature):	Phone:				
Chalyn D	ewey		530-841-2112				

Facility Name:	Golden Rush Espresso		
	The marked items repres	ent Health Code violations and must be correct	cted as follows:
		•	
	Zeigler	Received by (Signature):	Date: 02/28/2024
REHS (Print): Chalyn I	Dewey	REHS (Signature):	Phone: 530-841-2112

Facility Name:	Golden Rush Espre	esso	
	The marked items r	represent Health Code violations and must be co	orrected as follows:
Received By (Print):	Zoiglor	Received by (Signature):	Date:
REHS (Print):	Zeigler	REHS (Signature):	02/28/2024 Phone:
Chalyn [Dewey	REDO (Signature).	530-841-2112