



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: Montague Elementary Cafeteria	Permit # 000334
Address: 430 Prather Street Montague CA 96064	
Permit Holder: Montague Elementary Cafeteria	Permit To Operate: <input checked="" type="radio"/> Valid <input type="radio"/> Not Valid
Phone: 530-451-3001	E-mail: vnicholson@montague.k12.ca.us
Food Safety Certified Employee: Vanessa Nicholson	Expiration Date: 07/2025

		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; font-size: 1.2em;">ROUTINE INSPECTION CONDUCTED ON THIS DATE</p> <p>NOTE: Since covid, Montague Elementary Cafeteria has been packaging food to Little Shasta Elementary and most currently, Yreka Preschool.</p> <p>14) Observed paint chipping on the walls in the dry storage area. Observed barewood in the dry storage area, walk-in refrigerator and freezer. Ensure barewood is finished to be smooth, easily cleanable, nonabsorbent, and durable. Correct or repair 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			
	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): Vanessa Nicholson	Received by (Signature): _____ Date: 02/29/2024
REHS (Print): Chalyn Dewey	REHS (Signature): _____ Phone: 530-841-2112

Facility Name: Montague Elementary Cafeteria

The marked items represent Health Code violations and must be corrected as follows:

Received By (Print):
Vanessa Nicholson

Received by (Signature):

Date:
02/29/2024

REHS (Print):
Chalyn Dewey

REHS (Signature):

Phone:
530-841-2112

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The marked items represent Health Code violations and must be corrected as follows:

Empty space for listing health code violations and correction details.

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