

## **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	<sup>me:</sup> Jackson S	tree	t Scł	nool	Permit # 000267				
Address: 405 Jackson St., Yreka, CA 96097										
Permit	Permit Holder: Permit To Operate:  Jackson Street School   Valid Not Valid									
	Phone: 530-842-8561 E-mail: rhead@yrekausd.net									
Food S	Food Safety Certified Employee: Renee Head Expiration Date: 05/2027									
MAJ OUT COS The marked items represent Health Code violations and must be corrected as follows:										
Femp.	1	Food Temp.								
	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE				
L/ət	3	Storage/ Disp.								
Protection Time/ Temp.	4	Frozen Food				28) Facility attempted to correct the gap at the bottom of the back entrance door with a				
	5	Pure Food				brush-like and flexible material that is not durable enough to prevent entrance of rodents				
	6	Reused Food				or insects. Utilize material that is sufficient to prevent the entrance of contamination				
P	7	Transportation				sources. Repair within 90 days.				
ø)	8	Storage Fac.								
rage	9	Refrig. Units								
Food Storage	10	Thermometer								
	11	Hazardous Mat.				CONTINUE TO WORK TOWARDS COMPLIANCE ON VIOLATIONS FOUND ON				
	12	Spoils				PREVIOUS INSPECTION: example- patch holes, repaint damaged surfaces on walls				
Uten./Equip.	13	Wash/ Sanitize				and ceilings.				
	14	Equip. Condition								
en./	15	Utensil Condition								
Ď	16	Storage								
Ø)	17	Handwashing								
oye	18	Employee Hygiene								
Employee	19	Employee Habits								
Ш	20	Food Cert./ Card								
Water	21	Water								
	22	Cross Con.								
Waste	23	Liquid Waste								
	24	Refuse								
Vermin	25	Rodents/ Insects								
Ver	26	Animal/ Fowl								
	27	Ventilation								
Se	28	Doors		X						
Facilities	29	Floors								
Fас	30	Walls - Ceilings								
	31	Toilet Fac.								
	32	Janitorial Fac.								
	33	Lighting								
Misc	34	Clothing - Linen								
	35	Signs	Ш							
		Misc.								
			)UT =	Out	of com	ppliance COS = Corrected on-site				
Received By (Print): Received by (Signature): Date: Amy Chapman 03/08/2024										
REHS (Print): REHS (Signature): Phone: 530-841-2112										

Facility Name:	Jackson Street School	
	The marked items represent Health Code violations and must be corrected as follows:	
Received By (Print):	Received by (Signature):	ate:
	y Chapman	03/08/2024
REHS (Print): Chalyn De	REHS (Signature): Pewey	hone: 530-841-2112

Facility Name:	Jackson Street School	ol	
	The marked items rep	oresent Health Code violations and must be co	prrected as follows:
		•	
	Chapman	Received by (Signature):	Date: 03/08/2024
REHS (Print): Chalyn I	 Dewey	REHS (Signature):	Phone: 530-841-2112

Facility Name:	Jackson Street School		
	The marked items represent Health C	ode violations and must be corrected as foll	ows:
Received By (Print):	Received by	(Signature):	Date:
	y Chapman		03/08/2024
REHS (Print):	REHS (Sigr	nature):	Phone:
Chalyn [	Dewey		530-841-2112