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 | Naı | me: Smoked T | omato | Pie | | Permit # 000770 | | | | |
|---|--|---------------------------|----------|--------------|---|------------------------------------|--|--|--|--|
| Addres | s: | Smoked Toma | to Pie | LLC | | | | | | |
| Permit | Permit Holder: Smoked Tomato Pie, LLC Permit To Operate: Valid Not Valid | | | | | | | | | |
| Phone: 530-841-7119 E-mail: thefolks@smokedtomatopie.com | | | | | | | | | | |
| Food Safety Certified Employee: Kathleen T. Gerhardt Expiration Date: 11/2028 | | | | | | | | | | |
| MAJ OUT COS | | | | | | | | | | |
| Protection Time/ Temp. | 1 | Food Temp. | | | DOUTING INODESTION CONDUCTED THIS DATE | | | | | |
| | 2 | Prep./ Service | | | ROUTINE INSPECTION CONDUCTED | THIS DATE | | | | |
| | 3 | Storage/ Disp. | | | 14) Unable to observe whether the ice machine at the bar is plumbed indire | | | | | |
| | 4 | Frozen Food | | | | | | | | |
| ctior | 5 | Pure Food | | | sink with a 1" air gap. Ice machines, including ice bins (or any equipment that | | | | | |
| rotec | 6 | Reused Food | | | discharges liquid waste) must be plumbed indirectly with a 1" air gap at the rim of flo sink. An appoint will be scheduled to view the plumbing. 14, 30) Observed bare wood on the wall behind the handsink at the bar or cabinets | | | | | |
| Д | _ | Transportation | | | | <i>y</i> . | | | | |
| Эе | _ | Storage Fac. | | | | ndsink at the bar or cabinets | | | | |
| Storage | | Refrig. Units | <u> </u> | | adjacent to it. Ensure the bare wood is finished in a manner that is easily cleanable, | | | | | |
| d St | | Thermometer | | | nonporous, durable in construction, and smooth. Repair | ir or correct within 90 days. | | | | |
| Food | | Hazardous Mat. | | | 36) Observed an insect control device above the food p | orep table. Insect control devices | | | | |
| | | Spoils | | - | shall be installed or not located over food handling area | | | | | |
| Uten./Equip. | | Wash/ Sanitize | | _ | Repair or correct immediately. | | | | | |
|)./Ec | | Equip. Condition | <u> </u> | × _ | - | | | | | |
| Uter | | Utensil Condition Storage | | | NOTE: Continue to work towards violation compliance found on 2/20/2024 inspec | | | | | |
| | | Handwashing | | | | found on 2/20/2024 inspection. | | | | |
| уее | | Employee Hygiene | \vdash | - | 1 | · | | | | |
| oldu | | Employee Habits | | | ┪ | | | | | |
| E | | Food Cert./ Card | | | | | | | | |
| ter | 21 | Water | | | 1 | | | | | |
| Wat | 22 | Cross Con. | | | | | | | | |
| ste | 23 | Liquid Waste | | | | | | | | |
| Wa | 24 | Refuse | | | | | | | | |
| Vermin Waste Water Emplo | 25 | Rodents/ Insects | | | | | | | | |
| Ver | 26 | Animal/ Fowl | | | | | | | | |
| | 27 | Ventilation | | | | | | | | |
| Se | 28 | Doors | | | | | | | | |
| -acilities | 29 | Floors | ш | | | | | | | |
| Fa | 30 | Walls - Ceilings | | × | | | | | | |
| | | Toilet Fac. | ш | | 1 | | | | | |
| | | Janitorial Fac. | ш | _ | | | | | | |
| | | Lighting | | | 4 | | | | | |
| Misc. | | Clothing - Linen | | \perp | 4 | | | | | |
| | | Signs | | \leftarrow | - | | | | | |
| MA.I – | | Misc. or violation C | - | X U | mpliance COS = Corrected on-site | | | | | |
| | MAJ = Major violation OUT = Out of compliance COS = Corrected on-site Received By (Print): Received by (Signature): Date: Robert Gebhardt 03/12/2024 | | | | | | | | | |
| REHS (| Print | Chalyn Dew | ev | | REHS (Signature): | Phone: 530-841-2112 | | | | |

| Facility Name: | Smoked Tomato Pie | |
|---------------------------|---|------------------|
| | The marked items represent Health Code violations and must be corrected as follows: | |
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| Received By (Print): | Received by (Signature): Date: Obert Gebhardt | 03/12/2024 |
| REHS (Print): Chalyn D | REHS (Signature): Phon | e: 0-841-2112 |

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| | ert Gebhardt | Received by (Signature): | Date: 03/12/2024 | | |
| REHS (Print): Chalyn [| Dewey | REHS (Signature): | Phone: 530-841-2112 | | |

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| Received By (Print): | Received by (Signature): | Date: | | | | | |
| Rob | ert Gebhardt | 03/12/2024 | | | | | |
| REHS (Print): Chalyn D | REHS (Signature): Dewey | Phone: 530-841-2112 | | | | | |