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> Yreka Elk'	s Lo	dge		Permit # 000495
Addres	SS:	322 W Miner S	tree	t, Yre	eka (	CA 96097
Permit				-,		Permit To Operate:
Yreka Elks   Valid O Not Valid						
Phone	Phone: 530-842-1980 E-mail: brianfavero@cot.net					
Food S	Food Safety Certified Employee: Expiration Date:					
MAJ OUT COS The marked items represent Health Code violations and mu						The marked items represent Health Code violations and must be corrected as follows:
ġ	1	Food Temp.			000	
emp		Prep./ Service				ROUTINE INSPECTION CONDUCTED ON THIS DATE
e/ T	3	Storage/ Disp.				12) Observed Oppm oblering conitizer at the bar's disburgher. Ensure the disburgher
Tim	4	Frozen Food				13) Observed 0ppm chlorine sanitizer at the bar's dishwasher. Ensure the dishwasher dispenses 100ppm chlorine disinfectant. Correct immediately.
tion	5	Pure Food				
ip. Food Storage Protection Time/ Temp.	6	Reused Food				14) Observed dust buildup on the compressor's shield in the Randell, standup reach in
	7	Transportation				refrigerator. Maintain the equipment is a clean manner and fully operable.
	8	Storage Fac.				17) Observed no paper towel in the dispenser at the hand wash station at the bar.
	9	Refrig. Units				Ensure each hand washing station is constantly supplied with hot water, pump soap,
	10	Thermometer		_		and single use paper towel in the dispenser. Correct immediately.
	11	Hazardous Mat.				
	12	Spoils				20) Facility does not have a Food Safety Manager Certificate on site. Ensure a copy of
Uten./Equip.	13	Wash/ Sanitize		X		the Food Manager Certification is on site. If facility does not have a food safety certificate, then obtain one within 60 days.
	14	Equip. Condition		$\times$		certificate, then obtain one within oo days.
en./	15	Utensil Condition				
Ute	16	Storage				
Ð	17	Handwashing		Х		
oye	18	Employee Hygiene				
Employee	19	Employee Habits				
	20	Food Cert./ Card		$\times$		
ater	21	Water				
Waste Water	22	Cross Con.				
	-	Liquid Waste				
	24	Refuse				
ermin		Rodents/ Insects				
Ve Ve	26	Animal/ Fowl				
es		Doors				
Facilities		Floors				
Fа		Walls - Ceilings				
		Toilet Fac.				
	32	Janitorial Fac.				
<u> </u>		Lighting				
Misc.		Clothing - Linen				
		Signs				
MAL		Misc. or violation C			of cor	pliance COS = Corrected on-site
		y (Print):	/01=	Juit		Received by (Signature): Date:
	-,	Debbie	Rok	es		03/12/2024
REHS	(Print	<sup>t):</sup> Alexa Roche	;			REHS (Signature): Phone: 530-841-2112
						REHS (Signature): Phone:

Facility Name:	? Yreka Elk's Lodge						
	The marked items represent Health Code violations and must be corrected as follows:						
	The marked items represe	nt Health Code violations and musi	t be corrected as follows:				
		x .					
Received By (Print):		Received by (Signature):	D	ate:			
De	ebbie Rokes			03/12/2024			
REHS (Print):		REHS (Signature):	Р	hone:			
Àlexa Ro	oche	/		530-841-2112			
Page 2							

Facility Name:	Yreka Elk's Lodge		
	The marked items rep	present Health Code violations and mus	t be corrected as follows:
Received By (Print):	bie Rokes	Received by (Signature):	Date: 03/12/2024
REHS (Print):		REHS (Signature):	Phone:
Alexa R	oche		530-841-2112
Page 3			

Facility Name:	Yreka Elk's Lodge			
	The marked items re	present Health Code violations a	and must be corrected as follow	NS:
				_
Received By (Print):	bie Rokes	Received by (Signature):		Date: 03/12/2024
REHS (Print): Alexa Ro	oche	REHS (Signature):		Phone: 530-841-2112
				500 0 H E H E