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	Facility Name: Puerto Vallarta									
Address: 102 Monatgue Rd. Yreka CA 96097										
Permit Holder: Permit To Operate:										
Phone: 530-842-2257 E-mail: dominic.rodriguez1223@gmail.com										
Food S	Safet	y Certified Employ	^{yee:} T	nache Expiration Date: 08/2028						
				OUT		The marked items represent Health Code violations and must be corrected as follows:				
o.	1	Food Temp.		Х	\times					
em	2	Prep./ Service		Х		REINSPECTION CONDUCTED THIS DATE				
Protection Time/ Temp.	3	Storage/ Disp.		X		1) 4TH NOTICE: Observed chopped lettuce, and cheese held in ice bath at 55F. Reduce				
Tin	4	Frozen Food				the amount stored in the container by half and continue to fully submerged containers				
ction	5	Pure Food				around an ice bath to maintain cold foods at 41F or dairy foods at 45F or below.				
otec	6	Reused Food				Voluntarily discarded.				
Ъ	7	Transportation				2) 7TH NOTICE: Observed tostada bowls and taco shells at both the cooking station				
Ø	8	Storage Fac.				and dry storage area uncovered. Observed peeled onions, chopped bell peppers and				
rag	9	Refrig. Units		X		onions mixed, and mushrooms uncovered in the walk-in refrigerator. Cover all foods and				
Stc	10	Thermometer		_		practice safe food storage and handling. Corrected on site.				
Food Storage	11	Hazardous Mat.								
ш	12	Spoils				3) 3RD NOTICE: Observed raw beef and shelled eggs stored above or next to ready-to- eat foods in the standup reach-in refrigerator and cabinet below the deliprep cooler.				
iip.	13	Wash/ Sanitize				Store all raw meats, fish and eggs below ready-to-eat food. Corrected on site.				
Éq.	14	Equip. Condition		X						
Uten./Equip.	15	Utensil Condition				14) Observed the following broken equipment:				
Ď	16	Storage				- missing compressor shield or baseboard to the beverage refrigeration unit				
e	17	Handwashing				 all nozzles missing on the flat top grill and stove damaged seal around the door to the walk-in refrigeration 				
loye	18	Employee Hygiene				Repair or replace within 90 days. Continue to work towards repairing broken equipment				
Employee	_	Employee Habits				mentioned on 03/01/2023 inspection report marked with #9.				
	20	Food Cert./ Card								
Water	-	Water				14) Observed the bottom shelves of the prep tables rusted or finishes in chipping				
	22	Cross Con.				causing it to be uncleanable. Maintain non-food contact surfaces in food prep area to be smooth, cleanable, cleanable, and nonabsorbent. Repair or correct within 90 days.				
Waste	-	Liquid Waste				should, cleanable, cleanable, and honabsorbent. Repair of correct within 30 days.				
Š	24	Refuse				29) Observed excessive buildup of food debris, dirt, or grease on the floors throughout				
Vermin		Rodents/ Insects				the entire facility and hard to reach places, especially at the cooking station. Maintain				
<e></e>		Animal/ Fowl	-			unit in good repair, clean, and does not pose a fire hazard. Clean immediately.				
	_	Ventilation				36) Observed the beverage dispenser discharge tube in the hand sink at the bar.				
ies	_	Doors				Observed the ice bin discharge tube plumbed indirectly into the floor sink without a 1" air				
Facilities		Floors		×		gap. Equipment that releases liquid waste must be plumbed indirectly with a 1" air gap				
Ц		Walls - Ceilings				at the rim of floor sink. Repair or correct within 90 days.				
	-	Toilet Fac.				****A REINSPECTION FEE IS ASSESSED FOR NON-COMPLIANCE OF REPEAT****				
		Janitorial Fac.				A INDINGE CHOIN FEE IS ASSESSED FOR NON-COMPLIANCE OF REPEAT				
		Lighting				Note: continue to work towards compliance found on 03/01/2024 inspection report.				
Misc.		Clothing - Linen								
Σ		Signs		X						
MA.I =		Misc. or violation	OUT =		of com	apliance COS = Corrected on-site				
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site Received By (Print): Received by (Signature): Date: Tami Gamache 03/13/2024										
REHS (Print): REHS (Signature): Phone: Chalyn Dewey 530-841-2112										

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Received By (Print):	mi Gamache	Received by (Signature):	Date: 03/13/2024
		DEHS (Signature)	Phone:
REHS (Print): Chalyn D	ewey	REHS (Signature):	530-841-2112
Page 2			

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