

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	, NIO	mo:				Pormit #							
	Facility Name: Vallarta Grocery Store Permit # 000471												
Address: 348 Main Street Tulelake CA													
Permit	Permit Holder: Permit To Operate:												
Dhono	Roman and Irma Alonso Valid Not Valid												
Phone: 530-667-2525 E-mail: vallartagrocery@icloud.com													
Food S	Food Safety Certified Employee: Irma Alonso Expiration Date: 04/2026												
			MAJ	OUT	COS	The marked items represent Health Code violations and must be corrected as follows:							
р.	1	Food Temp.				ROUTINE INSPECTION CONDUCTED ON THIS DATE							
Protection Time/ Temp.	2	Prep./ Service											
	3	Storage/ Disp.				30) 2ND NOTICE: Observed holes in the ceiling above the dry food storage area. The opening could provide entry points for pests and vectors. Seal and repair as soon as possible.							
	4	Frozen Food											
	5	Pure Food											
	6	Reused Food											
	7	Transportation											
Food Storage	8	Storage Fac.											
	9	Refrig. Units											
	10	Thermometer											
	11	Hazardous Mat.											
ш	12	Spoils											
ip.	13	Wash/ Sanitize											
Uten./Equip.	14	Equip. Condition											
en./	15	Utensil Condition											
Ţ	16	Storage											
Φ	17	Handwashing											
Employee	18	Employee Hygiene											
ldm	19	Employee Habits											
Ш	20	Food Cert./ Card											
Water	21	Water											
Wa	22	Cross Con.											
Waste	23	Liquid Waste											
Wa	24	Refuse											
Vermin		Rodents/ Insects											
Ver	26	Animal/ Fowl											
	27	Ventilation											
Se	28	Doors											
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: Rosario Flores 3/14/2024													
REHS (Print): Alexa Roche						REHS (Signature): Phone:							

Facility Name:	Vallarta Grocery Store	
	The marked items represent Health Code violations and must be corrected as follows	3:
Received By (Print):		Date:
REHS (Print):	psario Flores REHS (Signature):	3/14/2024 Phone:

530-598-3228

Alexa Roche

Facility Name:	Vallarta Grocery Store									
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REHS (Print):	REHS (Signature):	Phone:								

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