## 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: Rite Aid #6	6104	- Yr	eka	Permit # 000394					
Address: 807 South Main St., Yreka, CA 96097											
Permit	Permit Holder:Permit To Operate:										
Phono	Rite Aid Valid Not Valid										
Phone: 530-842-7310 E-mail: mario.patino@riteaid.com											
Food S	Food Safety Certified Employee: N/A Expiration Date:										
			MAJ	OUT	COS	The marked items represent Health Code violations and must be corrected as follows:					
Protection Time/ Temp.	1	Food Temp.				ROUTINE INSPECTION CONDUCTED THIS DATE					
		Prep./ Service				ROOTINE INSPECTION CONDUCTED THIS DATE					
		Storage/ Disp.				11) Observed unlabeled working spray bottle next to the warewashing area at the ice cream service area. Ensure all working spray bottles are labeled to prevent mishand					
		Frozen Food									
ctio		Pure Food				of chemicals. Correct immediately.					
rote		Reused Food				13) Observed paper towel not in a dispenser in the women employee's restroom. Ensure					
<u>п</u>		Transportation				all handwashing station are constantly supplied with hot water, pump soap and single-					
ge		Storage Fac.				use paper towel in a dispenser. Correct immediately.					
Food Storage		Refrig. Units Thermometer	-	-							
S pc				×							
Fo		Hazardous Mat. Spoils		$\hat{}$							
Uten./Equip.		Wash/ Sanitize		X							
	_	Equip. Condition									
in./E		Utensil Condition									
Ute		Storage									
		Handwashing									
Employee		Employee Hygiene									
mpk	19	Employee Habits									
Ш	20	Food Cert./ Card									
Water	21	Water									
	22	Cross Con.									
Waste	23	Liquid Waste									
	24	Refuse									
ermin		Rodents/ Insects									
\ Ve	26	Animal/ Fowl									
		Ventilation									
ies		Doors									
-acilities		Floors	Ш								
Fa		Walls - Ceilings									
		Toilet Fac.									
		Janitorial Fac.									
		Lighting Clothing - Linen									
Misc.											
		Signs Misc.									
MAJ =			UT =	Out	of con	apliance COS = Corrected on-site					
Received By (Print): Received by (Signature): Date:											
	Mario Patino 03/21/2024										
REHS (Print): REHS (Signature): Phone: Chalyn Dewey 530-841-2112											

Facility Name:	Rite Aid #6104- Yreka	
	The marked items represent Health Code violations and must be corrected as follows:	
Received By (Print):		
	ario Patino	03/21/2024
REHS (Print): Chalyn D	REHS (Signature): Photoewey	one: 330-841-2112
	<u> </u>	

Facility Name:	Rite Aid #6104- Yreka	
	The marked items represent Health Code violations and must be corrected as follows:	
	· ·	
Received By (Print): Mari	Received by (Signature): Date to Patino	e: 03/21/2024
REHS (Print): Chalyn I	REHS (Signature): Pho	ne: 30-841-2112

Facility Name:	Rite Aid #6104- Yreka	
	The marked items represent Health Code violations and must be corrected as fo	llows:
Descripted Des (Detail)	Pageinad by (Cignotura)	Doto
	Received by (Signature): rio Patino	Date: 03/21/2024
REHS (Print): Chalyn [	REHS (Signature): Dewey	Phone: 530-841-2112