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 Name: Siskiyou County Jail Permit # 615765											
Address: 315 S Oregon St. Yreka CA 96097											
Permit Holder: Permit To Operate: S30-842-8173 Valid Not Valid											
Phone: 530-842-8173 E-mail: michelle.ward@siskiyousheriff.org											
Food Safety Certified Employee: Michelle Ward Expiration Date: 03/2025											
MAJ OUT COS The marked items represent Health Code violations and must be corrected as follows:											
Protection Time/ Temp.	1	Food Temp.	IVIAG	001	500	The marked tems represent realth odde violations and must be corrected as follows.					
		Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE					
		Storage/ Disp.									
		Frozen Food									
	5	Pure Food				ALL FOOD HANDLING IS SATISFACTORY AT PRESENT TIME.					
otec	6	Reused Food									
Pro	7	Transportation		1							
	8	Storage Fac.		1							
age.	9	Refrig. Units		1		30) Observed damaged baseboards around the corners of the chemical storage and					
Food Storage	10	Thermometer				warewashing area. Maintain floors and baseboards in a manner to be smooth, durable,					
poc	11	Hazardous Mat.				nonabsorbent, and easily cleanable. Repair within 90 days.					
Ä	12	Spoils									
<u>.d</u>	13	Wash/ Sanitize				30) Observed the finishes to the walls in the employees restroom damaged. Maintain					
Uten./Equip.	14	Equip. Condition				walls in the restroom to be nonabsorbent and easily cleanable. Repair or correct within					
en./	15	Utensil Condition				90 days.					
ž	16	Storage									
Φ	17	Handwashing									
oye	18	Employee Hygiene									
Employee	19	Employee Habits									
	20	Food Cert./ Card									
Water	21	Water									
×	22	Cross Con.									
Waste		Liquid Waste									
××	24	Refuse									
Vermin		Rodents/ Insects									
\end{array}	26	Animal/ Fowl									
		Ventilation									
es	28	Doors									
-acilities	_	Floors									
Га	30	Walls - Ceilings		X							
		Toilet Fac.									
	32	Janitorial Fac.									
		Lighting									
S		Clothing - Linen		_							
		Signs		\dashv							
MA I.		Misc.	UIT -	Out of	com	nlianca COS - Corrected on-site					
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site Received By (Print): Received by (Signature): Date:											
Michelle Ward 03/28/2024											
REHS (Print): REHS (Signature): Phone: 530-841-21											

Facility Name: Sisk	ciyou County Jail							
Th	The marked items represent Health Code violations and must be corrected as follows:							
Received By (Print):	Received by (Signature):	Date:						
Michelle		03/28/2024						
REHS (Print): Chalyn Dewey	REHS (Signature): y	Phone: 530-841-2112						
<u> </u>								

Facility Name:	Siskiyou County Jail							
	The marked items represent Health Code violations and must be corrected as follows:							
Received By (Print):	nelle Ward	Received by (Signature):	Date: 03/28/2024					
REHS (Print): Chalyn I	Dewey	REHS (Signature):	Phone: 530-841-2112					

Facility Name:	Siskiyou County Jail		
	The marked items re	present Health Code violations and must be	corrected as follows:
		C	
	nelle Ward	Received by (Signature):	Date: 03/28/2024
REHS (Print): Chalyn D)ewey	REHS (Signature):	Phone: 530-841-2112