



### 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: <b>Westside Grocery</b>	Permit # <b>000480</b>
Address: <b>17608 Stateline Rd Tulelake CA</b>	
Permit Holder: <b>Gary Spears</b>	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: <b>530-667-5225</b>	E-mail:
Food Safety Certified Employee: <b>Sabrina Decker</b>	Expiration Date: <b>10/2027</b>

		MAJ	OUT	COS	
					The marked items represent Health Code violations and must be corrected as follows:
Protection Time/ Temp.	1	Food Temp.			
	2	Prep./ Service			
	3	Storage/ Disp.			
	4	Frozen Food			
	5	Pure Food			
	6	Reused Food			
	7	Transportation			
Food Storage	8	Storage Fac.			
	9	Refrig. Units			
	10	Thermometer			
	11	Hazardous Mat.			
	12	Spoils			
Uten./Equip.	13	Wash/ Sanitize			
	14	Equip. Condition			
	15	Utensil Condition			
	16	Storage		X	
Employee	17	Handwashing		X	
	18	Employee Hygiene			
	19	Employee Habits			
	20	Food Cert./ Card			
Water	21	Water			
	22	Cross Con.			
Waste	23	Liquid Waste			
	24	Refuse			
Vermin	25	Rodents/ Insects			
	26	Animal/ Fowl			
Facilities	27	Ventilation			
	28	Doors			
	29	Floors			
	30	Walls - Ceilings			
	31	Toilet Fac.			
	32	Janitorial Fac.			
	33	Lighting			
Misc.	34	Clothing - Linen			
	35	Signs			
	36	Misc.		X	

**ROUTINE INSPECTION CONDUCTED ON THIS DATE**

17,36) Observed a significant shift in the bar area's location, now lacking a handwashing sink but featuring new equipment. Provide this department with cut sheets for all new equipment. Submit cut sheet for all future equipment prior to installation into the facility.

16) Observed household-use only mixer. Ensure all new or replaced equipment are preapproved by the agency and are ANSI certified or NSF listed. Provide manufacturer's cut sheet to this agency immediately for approval,

MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site
Received By (Print): <b>bridget mandzij</b> Received by (Signature): _____      Date: <b>4/3/2024</b>
REHS (Print): <b>Alexa Roche</b> REHS (Signature): _____      Phone: <b>530-841-2117</b>

**Facility Name:** Westside Grocery

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bridget mandzij

Received by (Signature):

Date:  
4/3/2024

REHS (Print):  
Alexa Roche

REHS (Signature):

Phone:  
530-841-2117

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