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: Taco Bell - Yreka Permit # 000451											
Address: 1804 Fort Jones Rd., Yreka, CA 96097											
Permit Holder: DeClark Enterprises Permit To Operate: Valid Not Valid											
Phone: 530-842-3686											
Food Safety Certified Employee: James Petersen Expiration Date: 12/2028											
				OUT		The marked items represent Health Code violations and must be corrected as follows:					
o.	1	Food Temp.				,					
Protection Time/ Temp.	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE					
	3	Storage/ Disp.		X		3, 9) Observed ice buildup on the compressor unit and boxes below in the walk-in					
	4	Frozen Food				freezer. Maintain compressor in good repair and fully serviceable. Immediately remove					
	5	Pure Food				ice buildup on these boxes and away from the compressor unit. Clean and sanitize					
	6	Reused Food				according to manufacturers instruction, and repair within 90 days.					
	7	Transportation				9) Observed dust buildup on the fan guards on the compressor and throughout the body					
Food Storage	8	Storage Fac.				in the walk-in refrigerator. Maintain equipment in a cleanly manner and fully operable at					
	9	Refrig. Units		X		all times. Correct immediately.					
Stc	10	Thermometer				·					
900	11	Hazardous Mat.				13) Observed no hand soap or single-use paper towel at the handwashing station in the					
ш	12	Spoils				dry storage area. Maintain each handwashing station is supplied with warm water, hand soap, and single use paper towels at all times. Correct asap.					
Uten./Equip.	13	Wash/ Sanitize		X		soap, and single use paper towers at all times. Correct asap.					
	14	Equip. Condition		X		14) Observed a broken or partially detached foot pedal at the handwashing station next					
ten./	15	Utensil Condition				to the office. Maintain in good repair. Correct immediately.					
Ď	16	Storage									
е		Handwashing		X		14) Observed both soda/beverage tubes draining into floor sinks without an air gap. Equipment that discharges liquid waste into floor sinks should drain indirectly with at					
loye	18	Employee Hygiene				least a 1" air gap. Repair or correct within 90 days.					
Employee		Employee Habits				gap: repair of correct mains of dayor					
	20	Food Cert./ Card				14) Observed plastic bags wrapped around the plumbing pipes to both the prep sink and					
Water		Water				3-compartment-sink. Liquid waste should discharge indirectly into the floor sink without					
		Cross Con.				any spillage outside, and with at least a 1" air gap or twice the diameter of the pipe. Remove plastic bags and repair plumbing within 90 days.					
Waste		Liquid Waste				Nemove plastic bags and repair plumbing within 50 days.					
		Refuse				14) Observed air curtains not functioning at both front door entrances and drive through					
Vermin		Rodents/ Insects				windows. Maintain units in good repair and operable at all times. Repair within 90 days.					
\ Ve	26	Animal/ Fowl				AA OO) Ol aan a lamaa la liilaa aa dha firanna a bhaal (a aa ab alaa a la dha aa lliin					
		Ventilation				14, 29) Observed grease build-up on the floors and hard-to-reach places in the cooking station. Observed a build-up of syrup in the cabinet below the ice-e machine. Clean and					
es		Doors				sanitize equipment and floors daily. Correct immediately.					
-acilities		Floors		X		, · · · · · · · · · · · · · · · · ·					
Е		Walls - Ceilings									
		Toilet Fac.									
		Janitorial Fac.									
		Lighting									
Misc.		Clothing - Linen									
Ξ		Signs									
MA I		Misc.	ILIT -	Out a	f com	apliance COS = Corrected on-site					
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site Received By (Print): Received by (Signature): Date:											
Desirae Lopez 04/09/2024											
REHS (Print): REHS (Signature): Phone: Chalyn Dewey 530-841-2112											

Facility Name: Tac	co Bell - Yreka	
7	The marked items represent Health Code violations and r	must be corrected as follows:
Received By (Print):	Received by (Signature):	Date:
Desira	ne Lopez	04/09/2024
REHS (Print):	REHS (Signature):	Phone:
Chalyn Dewe	Э У	530-841-2112

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Desirae Lopez		04/09/2024
REHS (Print): Chalyn Dewey	REHS (Signature):	Phone:
Chaigh Dewey		530-841-2112

Facility Name:	Taco Bell - Yreka	
	The marked items represent Health Code violations and m	ust be corrected as follows:
	Bertall (C)	
	Received by (Signature): sirae Lopez	Date: 04/09/2024
REHS (Print): Chalyn D	REHS (Signature): Dewey	Phone: 530-841-2112