

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: Christy's Herbs and Jam 000064							Permit # 000064		
Address: 9100 Belgian Ln Fort Jones CA 96032									
Permit	Hol	<sup>der:</sup> Christy Sco	ott				Permit To Operate:		
Phone	: E	530-468-2711				<sup>E-mail:</sup> cfsco	tt@gmail.com		
Food S	Safe	ty Certified Employ	ee: (	Chris	ty So		Expiration Date: 07/2024		
				OUT	-		ent Health Code violations and must be corrected as follows:		
Protection Time/ Temp.	1	Food Temp.	1017 10	001	000		E INSPECTION CONDUCTED ON THIS DATE		
	2	Prep./ Service				KOUTIN	EINSPECTION CONDUCTED ON THIS DATE		
	3	Storage/ Disp.							
	4	Frozen Food				21) Submit a complete water sample results to this Department within the next 30 days.			
	5	Pure Food							
	6	Reused Food							
Ţ,	7	Transportation							
a)	8	Storage Fac.				NOTE: SUBMIT UPDATED LABELS			
rag	9	Refrig. Units							
Food Storage	10	Thermometer							
000	11	Hazardous Mat.							
ш. 	12	Spoils							
uip.	13	Wash/ Sanitize							
Uten./Equip.	14	Equip. Condition							
ten.		Utensil Condition							
		Storage							
e		Handwashing							
Employee		Employee Hygiene							
Ш Ш		Employee Habits							
<u>ب</u>		Food Cert./ Card		$\sim$					
Water		Water Cross Con.		Х					
> 0		Liquid Waste							
Waste		Refuse							
		Rodents/ Insects							
Vermin		Animal/ Fowl							
<u> </u>	27	Ventilation							
		Doors							
Facilities		Floors							
Faci		Walls - Ceilings							
		Toilet Fac.							
	32	Janitorial Fac.							
	33	Lighting							
ن		Clothing - Linen							
Misc.	35	Signs							
		Misc.							
			)UT =	Out	of com	ppliance COS = Corrected on-site	2.		
Received By (Print): Received by (Signature): Date:									
REHS (Print): REHS (Signature): Phone: 530-841-2117									

Facility Name:	Christy's Herbs and Jam						
The marked items represent Health Code violations and must be corrected as follows:							
	ζ.						

Received	By	(Print):
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Received by (Signature):

Date:

Christy Scott

REHS (Print): Alexa Roche

REHS (Signature):

Phone: 530-841-2117

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	The marked items represent Health Code violations and must be corrected as follows:							
	ζ.							
Received By (Print):	Received by (Signature):	Date:						
	isty Scott							
REHS (Print): Alexa R	REHS (Signature):	Phone:						
Page 3		530-841-2117						
1 490 0								

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	nristy Scott	
REHS (Print): Alexa Ro	REHS (Signature):	Phone:
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