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	Facility Name: Bogus Elementary 000116											
Address: 13735 Ager Beswick Rd, Montague CA												
Permit	Hol	der:	9		- 21	Permit To Operate:						
Dhana	1	Bogus Ele	ment	ary		Valid Not Valid						
	Phone: 530-459-3163 E-mail: esalvestro@sisnet.ssku.k12.ca.us											
Food Safety Certified Employee: Erika A. Salvestro Expiration Date: 03/2029												
			MAJ	1		The marked items represent Health Code violations and must be corrected as follows:						
ġ.	1	Food Temp.				ROUTINE INSPECTION CONDUCTED THIS DATE						
Protection Time/ Temp.	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE						
	3	Storage/ Disp.		\times								
	4	Frozen Food				3) Observed raw chicken and beef stored above ready-to-eat foods in the reach-in						
ction	5	Pure Food				refrigerator. Prevent food contamination by storing ready-to-eat foods above raw foods.						
otec	6	Reused Food				Correct immediately.						
ā	7	Transportation										
Θ	8	Storage Fac.										
orag	9	Refrig. Units										
Food Storage	10	Thermometer	3									
000	11	Hazardous Mat.										
<u> </u>	12	Spoils		5								
ip.	13	Wash/ Sanitize										
Uten./Equip.	14	Equip. Condition			-							
ten.	15	Utensil Condition										
Ď	16	Storage		5								
Θ	17	Handwashing										
Employee	18	Employee Hygiene										
du	19	Employee Habits		5								
	20	Food Cert./ Card										
Water	_	Water										
	22	Cross Con.										
Waste	_	Liquid Waste										
	24	Refuse										
Vermin	<u> </u>	Rodents/ Insects										
Vel	26	Animal/ Fowl			6							
	27	Ventilation										
Se	28	Doors			ð.							
Facilities	29	Floors										
Fa	30	Walls - Ceilings										
	31	Toilet Fac.										
	32	Janitorial Fac.										
	-	Lighting										
SC.	34	Clothing - Linen										
Misc.		Signs	_									
		Misc.										
2			501 =	Outo	of con	npliance COS = Corrected on-site						
Receiv	eu B	y (Print): Erika A	. Sal	vestr	0	Received by (Signature): Date: 05/20/2024						
REHS	(Print	t): Chalvn Dow				REHS (Signature): Phone: 530-841-2112						
	Chalyn Dewey 530-841-2112											

Facility Name:	Bogus Elementary	
	The marked items represent Health Code violations and must be corrected as follows:	
	`	
	Possived by (Cignative)	-4
Received By (Print):	Received by (Signature): D	ate: 05/20/2024
		hone:
REHS (Print): Chalyn D		none: 530-841-2112
Page 2	/	

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$\boldsymbol{\zeta}$
eived By (Print): Received by (Signature): Date:
eived By (Print): Received by (Signature): Date: Erika A. Salvestro 05/20/2024
HS (Print): REHS (Signature): Phone:
Chalyn Dewey 530-841-2112 Page 3 530-841-2112

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	ς		
Received By (Print):	Received by (Si	gnature):	Date:
	a A. Salvestro		05/20/2024
REHS (Print):	REHS (Signatu	re):	Phone:
Chalyn E	vewey		530-841-2112