



### 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>Urena Fruit Stand</b>	Permit # <b>000470</b>
Address: <b>6449 County Rd 21, Orland CA 95963</b>	
Permit Holder: <b>Juan Urena</b>	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: <b>530-321-9160</b>	E-mail: <b>juansfruitstand@yahoo.com</b>
Food Safety Certified Employee: <b>N/A</b>	Expiration Date:

		MAJ	OUT	COS	
					The marked items represent Health Code violations and must be corrected as follows:
Protection Time/Temp.	1	Food Temp.			<p style="text-align: center; font-weight: bold; margin-bottom: 20px;">ROUTINE INSPECTION CONDUCTED THIS DATE</p> <p>3) Facility sales honey that is labeled as their own product, but they are neither the beekeeper, or is permitted to repackage honey. Facility obtains honey in a large drum, labeled from the beekeeper. The drum is taken to another facility that repackages the honey and puts on the final label. Facility is unable to produce documents to confirm whether honey is repackaged from an approved location or source. Honeys were pulled from the shelf.</p> <p>Discontinue sales of honey until one of the following occurs:</p> <ol style="list-style-type: none"> <li>1) Keep the beekeepers' label on the product.</li> <li>2) Provide certification from the warehouse that holds a permit to repackage and label food.</li> <li>3) Obtain Cottage Food Operator permit from your local county health department to be able repackage honey using your own label.</li> </ol>
	2	Prep./ Service			
	3	Storage/ Disp.		X	
	4	Frozen Food			
	5	Pure Food			
	6	Reused Food			
	7	Transportation			
Food Storage	8	Storage Fac.			
	9	Refrig. Units			
	10	Thermometer			
	11	Hazardous Mat.			
Uten./Equip.	12	Spoils			
	13	Wash/ Sanitize			
	14	Equip. Condition			
	15	Utensil Condition			
Employee	16	Storage			
	17	Handwashing			
	18	Employee Hygiene			
	19	Employee Habits			
Water	20	Food Cert./ Card			
	21	Water			
	22	Cross Con.			
Waste	23	Liquid Waste			
	24	Refuse			
Vermin	25	Rodents/ Insects			
	26	Animal/ Fowl			
Facilities	27	Ventilation	<input type="checkbox"/>		
	28	Doors	<input type="checkbox"/>		
	29	Floors	<input type="checkbox"/>		
	30	Walls - Ceilings	<input type="checkbox"/>		
	31	Toilet Fac.	<input type="checkbox"/>		
	32	Janitorial Fac.	<input type="checkbox"/>		
	33	Lighting	<input type="checkbox"/>		
Misc.	34	Clothing - Linen	<input type="checkbox"/>		
	35	Signs	<input type="checkbox"/>		
	36	Misc.	<input type="checkbox"/>		

MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site	
Received By (Print): <b>Juan Urena</b>	Received by (Signature): _____ Date: <b>05/20/2024</b>
REHS (Print): <b>Chalyn Dewey</b>	REHS (Signature): _____ Phone: <b>530-841-2112</b>

**Facility Name:** Urena Fruit Stand

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