



### 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>GEMS Golden Eagle Charter School</b>	Permit # <b>000621</b>
Address: <b>501 S Main St., Yreka, CA 96097</b>	
Permit Holder: <b>Golden Eagle Charter School</b>	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: <b>530-926-5800</b>	E-mail: <b>eileen@gecs.org</b>
Food Safety Certified Employee: <b>Mary Mathus</b>	Expiration Date: <b>06/2027</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		X	
	14	Equip. Condition			
	15	Utensil Condition			
	16	Storage			
Employee	17	Handwashing			
	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.			

ROUTINE INSPECTION CONDUCTED THIS DATE

13) Observed chlorine sanitizer in spray bottle measuring between 10-50ppm. Observed quat. ammonium chloride (ie 409 multi-surface cleaner) disinfectant concentration greater than 400ppm. Proper manual disinfects at 100ppm for chlorine and 200ppm for quat. Utilize test strips to measure proper concentration. Correct immediately.

13) Observed no test strips available to test quat ammonium (ie 409 cleaner). Obtain QAC test strips immediately.

MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site	
Received By (Print): <b>Eileen Farnan</b>	Received by (Signature): _____ Date: <b>05/30/2024</b>
REHS (Print): <b>Chalyn Dewey</b>	REHS (Signature): _____ Phone: <b>530-841-2112</b>

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Received by (Signature):

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05/30/2024

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