

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

Facilit	Facility Name: Northern United Siskiyou Charter 505									
Address: 505 S Broadway, Yreka, CA 96097										
Permit Holder: Permit To Operate:										
	Northern United Siskiyou Charter School Valid Not Valid Not Valid							O Not Valid		
Phone: 530-842-4509 E-mail: vhastert@nucharters.org										
Food	Food Safety Certified Employee: N/A Expiration Date:									
			MAJ	OUT COS	The ma	rked items represent He	ealth Code violations and mu	ist be corrected	as follows:	
Protection Time/ Temp.	1	Food Temp.			DO					
	2	Prep./ Service			RO	ROUTINE INSPECTION CONDUCTED THIS DATE				
	3	Storage/ Disp.								
	4	Frozen Food								
tion	5	Pure Food								
otec	6	Reused Food			SATISFACTORY AT PRESENT TIME					
Pr	7	Transportation								
(1)	8	Storage Fac.								
rage	9	Refrig. Units	1942 - AN 19							
Food Storage	10	Thermometer								
poo	11	Hazardous Mat.		0						
ш	12	Spoils								
b.	13	Wash/ Sanitize	8	0						
Uten./Equip.	14	Equip. Condition								
en./	15	Utensil Condition								
Ĵ	16	Storage								
0	17	Handwashing								
oyee	18	Employee Hygiene								
Employee	19	Employee Habits								
ш	20	Food Cert./ Card								
Water	21	Water								
Wa	22	Cross Con.								
Waste	23	Liquid Waste								
Wa	24	Refuse								
Vermin	25	Rodents/ Insects								
Ver	26	Animal/ Fowl		0						
	27	Ventilation		-2						
S	28	Doors								
Facilities	29	Floors								
Fac	30	Walls - Ceilings								
	31	Toilet Fac.								
	32	Janitorial Fac.								
	33	Lighting								
°.	34	Clothing - Linen								
Misc.	35	Signs								
		Misc.								
			OUT = (Dut of com	pliance COS = C	orrected on-site				
Receiv	Received By (Print): Tammi Van Housen Received by (Signature): Date: 06/04/2024									
REHS (Print): REHS (Signature): Phone: 530-841-2112										
									Last modified 4/12/2022	

Facility Name: Northern United Siskiyou Charter 505

The marked items represent Health Code violations and must be corrected as follows:

r.

Received By (Print):	Received by (Signature):	Date:	
Tammi Van Housen		06/04/2024	
REHS (Print):	REHS (Signature):	Phone:	
Chalyn Dewey		530-841-2112	
Page 2			

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