## 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	Na	me: Butte Valle	ey El	eme	ntary	/	Perm	it# 000171
Addres	SS:	625 W Third S	C 70	100				
Permit Holder:Permit To Operate:								
Butte Valley Elementary								d Not Valid
Phone: 530-397-4000 E-mail: sgonzalez@bvalusd.org								
Food S	Food Safety Certified Employee: Soledad Gonzalez Expiration Date: 11/2027							
			MAJ	OUT	cos		The marked items represent Health Code violations and must be corre	ected as follows:
Protection Time/ Temp.	1	Food Temp.					ROUTINE INSPECTION CONDUCTED ON TH	IS DATE
	1000	Prep./ Service						
	200	Storage/ Disp.					SATISFACTORY AT PRESENT TIME	
	. 200	Frozen Food						
	1800	Pure Food						
	_	Reused Food						
	93/19	Transportation						
Food Storage		Storage Fac.	E 25					
	Telephone Inc.	Refrig. Units						
		Thermometer		3	0			
	_	Hazardous Mat.						
		Spoils		į.	0			
Uten./Equip.	J. 1919.0	Wash/ Sanitize						
		Equip. Condition						
Jten		Utensil Condition						
ר		Storage		,				
99		Handwashing						
Employee		Employee Hygiene						
Emp	_	Employee Habits		:	-			
	7 9	Food Cert./ Card	<u> </u>		_			
Water		Water						
<b>S</b>		Cross Con.						
Waste	_	Liquid Waste	<u> </u>					
>	- 7	Refuse						
Vermin		Rodents/ Insects						
Ve	-	Animal/ Fowl		8	0			
		Ventilation						
es	1	Doors			0			
Facilities	DATE:	Floors	,					
Ξ.	-	Walls - Ceilings		4				
		Toilet Fac.	Н					
		Janitorial Fac.						
		Lighting						
Misc.		Clothing - Linen						
		Signs						
MA I -		Misc. or violation C	III -	Out	of com	npliance	COS = Corrected on-site	
		v (Print):				ipilarice	Received by (Signature): Date:	
Received By (Print):  Destiny Campbell  Received by (Signature):  Date:  5/10/2024								
REHS (Print): REHS (Signature): Phone: 530-841-2117								

Facility Name:	Butte Valley Elementary	
	The marked items represent Health Code violations and must be correcte	d as follows:
	· ·	
	Received by (Signature): estiny Campbell	Date: 5/10/2024
REHS (Print): Alexa Ro	REHS (Signature):	Phone: 530-841-2117

Facility Name:	Butte Valley Elementary	
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	· ·	
Received By (Print):  Des	Received by (Signature): tiny Campbell	Date: 5/10/2024
REHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

Facility Name:	Butte Valley Elementary	
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	· ·	
Received By (Print): Dest	Received by (Signature): iny Campbell	Date: 5/10/2024
REHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche