



### 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>Siskiyou Brew Works</b>	Permit # <b>000428</b>
Address: <b>110 Squaw Valley Rd., McCloud, CA 96057</b>	
Permit Holder: <b>Pat &amp; Sue Brush</b>	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: <b>530-925-5894</b>	E-mail: <b>pbrush49@live.com</b>
Food Safety Certified Employee: <b>Quentin Zahara</b>	Expiration Date: <b>09/2024</b>

		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: 0;">COMPLAINT AND ROUTINE INSPECTION CONDUCTED THIS DATE</p> <p>Complaint received of a dog in the dining facility and concerns of cleanliness. These are observations found:</p> <p>Observed 2 pet dogs contained in the hair salon in the same building. Ensure pet dogs are excluded from entering the dining, sales, food preparation, food storage, or any areas that may contaminate the facility. Pet dogs are allowed in the outdoor dining area.</p> <p>14) Observed build-up of flours on the tabletop mixing equipment and on the floor below it. Observed buildup of grease and food on the pizza oven and rotating belts. Ensure equipment is clean and fully serviceable at all times. Correct immediately.</p> <p>13) Observed iodine sanitizer with a concentration less than 12.5ppm. Maintain iodine with a concentration of 25ppm. Continue to utilize ammonium chloride as a sanitizer and ensure it has a solution concentration of 200ppm. Corrected during inspection.</p> <p>13) Observed facility did not have test strips to test disinfectant concentration. Obtain test strips immediately.</p> <p>17) Observed water at 68F in the men restroom. Ensure handwashing facility is supplied with a minimum of 100F, but not more than 108F of warm water for proper handwashing. Correct immediately.</p> <p>29) Observed buildup of flours and dust on the floors and hard to reach to reach places. Maintain in a cleanly manner at all times. Clean and sanitize immediately.</p> <p>30) Observed paint peeling on the ceiling and wall in the back of the facility. Maintain walls and ceilings in a manner as to be smooth, easily cleanable, absorbent, and durable. Repair or correct within 90 days.</p>
	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	X	
	14	Equip. Condition	X		
	15	Utensil Condition			
	16	Storage			
Employee	17	Handwashing	X		
	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	X		
Facilities	27	Ventilation			
	28	Doors			
	29	Floors			
	30	Walls - Ceilings		X	
	31	Toilet Fac.			
	32	Janitorial Fac.			
	33	Lighting			
Misc.	34	Clothing - Linen			
	35	Signs			
	36	Misc.			

MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site	
Received By (Print): <b>Pat Brush</b>	Received by (Signature): _____ Date: <b>08/01/2024</b>
REHS (Print): <b>Chalyn Dewey</b>	REHS (Signature): _____ Phone: <b>530-841-2112</b>

**Facility Name:** Siskiyou Brew Works

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

Received By (Print):  
Pat Brush

Received by (Signature):

Date:  
08/01/2024

REHS (Print):  
Chalyn Dewey

REHS (Signature):

Phone:  
530-841-2112

**Facility Name:** Siskiyou Brew Works

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

[Empty area for listing health code violations and correction details]

Received By (Print): Pat Brush	Received by (Signature):	Date: 08/01/2024
-----------------------------------	--------------------------	---------------------

REHS (Print): Chalyn Dewey	REHS (Signature):	Phone: 530-841-2112
-------------------------------	-------------------	------------------------

**Facility Name:** Siskiyou Brew Works

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

Received By (Print):  
Pat Brush

Received by (Signature):

Date:  
08/01/2024

REHS (Print):  
Chalyn Dewey

REHS (Signature):

Phone:  
530-841-2112