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: Yreka Tru	ck St	top		Permit # 000557				
Addres	SS:	787 Montague	Rd '	Yrek	a CA	96097				
Permit Holder: Yreka Properties LLC Permit To Operate: Valid Not Valid										
Phone		530-200-8954				E-mail: yrekatravelplaza@gmail.com				
Food Safety Certified Employee: Lesly Pratt Expiration Date: 08/2025										
		D. 150 15	_	_		The marked items represent Health Code violations and must be corrected as follows:				
ection Time/ Temp.	1	Food Temp.	MAJ	OUT	COS	The marked items represent health code violations and must be corrected as follows.				
		Prep./ Service				ROUTINE INSPECTION CONDUCTED ON THIS DATE				
	3	Storage/ Disp.								
		Frozen Food				14) Observed missing electronic source to two of three compressors in the well- in				
	5	Pure Food				14) Observed missing electronic covers to two of three compressors in the walk-in refrigerator. Maintain unit in good repair. Repair, replace, or correct within 90 days. 2ND				
	1800	Reused Food	1			NOTICE.				
Prot	7									
	8	Transportation Storage Fac.	1			25) Observed numerous dead insects in the alternative storage area in the building in				
ige	-	Refrig. Units				the back. Clean and sanitize immediately.				
Profection Time/ Tempo Po Profection Time/ Tempo Po Po Storage Protection Time/ Temp.	TOWNS TO SERVICE STATE OF THE PARTY OF THE P	Thermometer	-							
Spc					9					
F000		Hazardous Mat. Spoils	-							
Section	-	Wash/ Sanitize		i i	0					
ı./Equip.	. 30 20 20	Equip. Condition	+	\sim						
		9/21/20		X						
Uter		Utensil Condition	-							
		Storage		3						
99/	-	Handwashing				NOTE:				
ploy		Employee Hygiene	-							
E		Employee Habits Food Cert./ Card		3	2	1) Facility has installed a new reach-in refrigerator in the front to store their dairies and				
	Total S	Water	+			deli meats. 2) Provided "Facility Inspection Notice" form				
Vater	GHT-00	Cross Con.	1			2) Florided Tacility Inspection Notice Torri				
te Water	_			3						
Waste Water	-	Liquid Waste Refuse								
Misc. Facilities Vermin Waste Water Employee Uten./Equip. Food Storage Protection Time/ Temp.	-		1	~						
ermi		Rodents/ Insects Animal/ Fowl	-	X						
Prodesign Services Protection Time/ Temp. Prodesign Storage Protection Time/ Temp. Prodesign Services Protection Time/ Temp. Protection Time/ Temp. Prodesign Services Protection Time/ Temp. Protection Time/ Tim				8	0					
	-	Ventilation	Н							
ies	8 8	Doors	Н		0					
acilli	Section	Floors								
ш		Walls - Ceilings	Н	3						
		Toilet Fac.	Н							
	32	Janitorial Fac.			2					
		Lighting		-						
Misc.	- 300	Clothing - Linen								
	-	Signs								
MA.I =		Misc. or violation (DUT -	Out	of com	pliance COS = Corrected on-site				
		y (Print):			, com	Received by (Signature): Date:				
		Diana V	Vatki	ns		08/08/2024				
REHS (Print	t): Chalyn Dew	еу			REHS (Signature): Phone: 530-841-2112				

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Facility Name:	Yreka Truck Stop	
	The marked items represent Health Code violations and m	ust be corrected as follows:
	Described to (Ormania)	
Received By (Print):	Received by (Signature): ana Watkins	Date: 08/08/2024
REHS (Print):	REHS (Signature):	Phone:
Chalyn D	Dewey	530-841-2112

Facility Name:	Yreka Truck Stop	
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Received By (Print): Dian	Received by (Signature): na Watkins	Date: 08/08/2024
REHS (Print): Chalyn [REHS (Signature): Dewey	Phone: 530-841-2112

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REHS (Print): Chalyn D	REHS (Signature): Ph	one: 530-841-2112								