



### 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>Carter's Sweets &amp; Eats</b>	Permit # <b>000738</b>
Address: <b>316 W. Miner St., Yreka, CA 96097</b>	
Permit Holder: <b>Veronica Carter</b>	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: <b>530-643-9697</b>	E-mail: <b>vkcarter22@gmail.com</b>
Food Safety Certified Employee:	Expiration Date:

		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;"><b>ROUTINE INSPECTION CONDUCTED THIS DATE</b></p> <p>2) Observed chemicals stored above clean wares and ware washing area. Store chemicals below utensils and 3 compartment sink, or in designated chemical storage area. Correct immediately.</p> <p>11) Observed unmarked working spray bottles in the chemical storage area. Ensure all bottles are marked with common name to prevent mishandling of hazardous materials. Correct immediately.</p> <p>13) Observed 400ppm QAC in a working spray bottle. Ensure sanitizer has a concentration of 200ppm QAC or 100ppm chlorine. Utilize test strips to measure sanitizer concentration. Correct asap.</p> <p>14) Observed bare wood shelving used for food storage in the back warewashing and storage area. Maintain raw wood as to be easily cleanable, non-absorbent, smooth, and durable. Seal or cover all bare wood surfaces within the next 30 days.</p> <p>14) Observed a non-ANSI certified Zokop ice maker in the back food storage area. Ensure all equipment utilize in facility are ANSI or NSF certified. Discontinue use, remove from facility, and replace within 90 days. Provide cut sheets of new equipment for pre-approval prior to purchase and installation.</p> <p>20) Observed no Food Safety (Manager) Certificate. Obtain one within 60 days and ensure a copy is on site.</p> <p>29) Observed the 3-compartment sink plumbed into a floor sink without a 1" airgap. Ensure the 3-comp sink is plumbed indirectly into floor sink with a 1" air gap above the rim of the floor sink. Correct or repair within 90 days. 2ND NOTICE. A REINSPECTION FEE WILL BE ASSESSED FOR FUTURE NON-COMPLIANCE.</p> <p>30) Observed numerous paper posters on the wall above the handwash sink and equipment in the food prep area in the front. Maintain non-food contact surfaces as to be easily cleanable, nonabsorbent, durable, and smooth. Laminate, seal, or remove posters within 30 days.</p> <p>NOTE: 1) Facility has 2 soft serve machines. One is in used and the other is pending used per building permit approval for electrical. If building permit is required, then facility is required to obtain approved plan check with health department prior to construction.            2) "Facility Inspection Notice" form issued.</p>	
	2	Prep./ Service		X		
	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.		X		
	12	Spoils				
Uten./Equip.	13	Wash/ Sanitize		X		
	14	Equip. Condition		X		
	15	Utensil Condition				
	16	Storage				
Employee	17	Handwashing				
	18	Employee Hygiene				
	19	Employee Habits				
	20	Food Cert./ Card		X		
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		X		
	30	Walls - Ceilings				
	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>Virginia Carter</b>	Received by (Signature): _____ Date: <b>08/29/2024</b>
REHS (Print): <b>Chalyn Dewey</b>	REHS (Signature): _____ Phone: <b>530-841-2112</b>

**Facility Name:** Carter's Sweets & Eats

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

Empty space for listing health code violations and correction details.

Received By (Print): Virginia Carter	Received by (Signature):	Date: 08/29/2024
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REHS (Print): Chalyn Dewey	REHS (Signature):	Phone: 530-841-2112
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