

Food Program Official Inspection Report

SISKIYOU COUNTY

COMMUNITY DEVELOPMENT DEPARTMENT

Environmental Health Division

806 S. Main Street

Yreka, California 96097

ph: (530) 841-2100, fax: (530) 841-4076

Facility Name: Rays Food Place ETDA. CA. CMHC#								
Facility Name: Rays Food Place FTVA, CA Address: 124 Collier Way FTVA Permit Holder: Permit To Operate: Ovalid Not Valid								
Permi	t Ho	C N P A	nar	Not 1	AVC .			Permit To Operate: □Valid □Not Valid
Phone: F20 4/7- 036 E-mail:								
Food Safety Certified Employee:								
Food Safety Certified Employee: Sohw Klukkert Expiration Date: 8/27 MAJ OUT COS The marked items represent Health Code violations and must be corrected as follows:								
Protection Time/ Temp.	1	Food Temp.						
	2	Prep./ Service			ROUTING	9 /NS	pection	conducted
	3	Storage/ Disp.			. ()	1.4		
	4	Frozen Food	\perp	Thi	sdate			
	5	Pure Food						
	6	Reused Food						
	7	Transportation	_	- c.	1. 1. 1.	4 0	2-1-11	4.4.
Food Storage	8	Storage Fac.		Ja	tis factory	at p	es ent	TIME
	9	Refrig. Units	+		/			
	10	Thermometer			1 10 10 10			
	11	Hazardous Mat.	+	\vdash				
Uten./Equip.	_	Spoils Wash/ Sanitize	+					
	0.	Equip. Condition						
		Utensil Condition					-	
		Storage	+	\dashv				
Employee		Handwashing						
	18	Employee Hygiene						
	19	Employee Habits					1951 14	
	20	Food Cert./ Card						
Vermir Waste Water	21	Water						
	22	Cross Con.						
	23	Liquid Waste						
.H	_	Refuse						
erm		Rodents/ Insects	-	\longrightarrow				
>		Animal/ Fowl						
Facilities	27	Ventilation	+-					
	28	Doors Floors	+	-				
	30	Walls - Ceilings	+					
	31	Toilet Fac.	+					
	32	Janitorial Fac.	+	\neg				
	_	Lighting						15-76
Misc.	_	Clothing - Linen	\top					
		Signs	\top			110000		
	_	Misc.						
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site								
Received By (Print): Received by (Signature): Date: 4/24/24								
REHS	Prin	David	Jo	CKSON	REHS (Signature)	Om	m	Phone: 530-841-2114