

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

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Addre	ee:	, se	lade		LATE	- 11		
Addie	33.	HWV	94	2	Seiad	Valley		
Permi	t Ho	Heath	Ph	1	seiad avge	/ /		Permit To Operate: □ Valid □ Not Valid
IPhone: E-mail:								
Food Safety Certified Employee: Head 6130 8								
Food Safety Certified Employee: Heather Lange MAJ OUT COS The marked items represent Health Code violations and must be corrected as follows:								
Protection Time/ Temp.	П	Food Temp) h	/	- Inc n		antii code violation	is and must be corrected as follows.
	2	Prep./ Service			ROL	ATIVE IUSD	ection	Conducted
	3	Storage/ Disp.			, ,	1 1	•	
	4	Frozen Food			This	date		
	5	Pure Food				•		
	6	Reused Food						
	7	Transportation			1000			2_ 1/
Food Storage	8	Storage Fac.			NXIX	PLAN CODI	0/ 45	F MUST be
	9	Refrig. Units			0-	1 1		
	10	Thermometer			91 60	or cooler.		FMustbe
	11	Hazardous Mat.						
	12	Spoils						
Uten./Equip.	13	Wash/ Sanitize						
	14	Equip. Condition						
	15	Utensil Condition						
	16	Storage		STOR STORY				
Water Employee	17	Handwashing						
	18	Employee Hygiene						
	19	Employee Habits						ESS HAMESTO SESSUE A
	20	Food Cert./ Card						
	21	Water		_	1			
	22	Cross Con.	\perp	\perp				
Waste	23	Liquid Waste		\perp	1			
	24	Refuse	_					- 12 mail 19
Vermir	25	Rodents/Insects						
	26	Animal/ Fowl	\perp	\perp				
Facilities	27	Ventilation						
		Doors	, ,					The state of the s
	29	Floors						
	_	Walls - Ceilings		_	230			
		Toilet Fac.						
	32	Janitorial Fac.					4	
		Lighting			-			
Misc.	34	Clothing - Linen						801
	35	Signs						
		Misc.	11/10 0		<u> </u>			
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site Received By (Print): Oct A Out Cost								
Received By (Print): Heather Lange Received by (Signature): Heather Sange 9/18/24								
REHS (Print): Heather Lange Received by (Signature): Heather Lange Phone: Phone: 30-841-								
and the state of t								