





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: <u>Ray's Food Place Happy Camp</u> | | | | CMHC# | |
| Address: <u>143 DAVIS Rd, Happy Camp CA 96039</u> | | | | | |
| Permit Holder: <u>C&K Market, INC</u> | | | Permit To Operate: <input type="checkbox"/> Valid <input type="checkbox"/> Not Valid | | |
| Phone: <u>541-412-3527</u> <u>530-493-2621</u> E-mail: | | | | | |
| Food Safety Certified Employee: <u>KAREN KING</u> | | | Expiration Date: <u>7/2025</u> | | |
| The marked items represent Health Code violations and must be corrected as follows: | | | | | |
| Protection Time/ Temp. | 1 | Food Temp. | | | Routine inspection conducted this date |
| | 2 | Prep./ Service | | | |
| | 3 | Storage/ Disp. | | | |
| | 4 | Frozen Food | | | |
| | 5 | Pure Food | | | |
| | 6 | Reused Food | | | |
| | 7 | Transportation | | | |
| Food Storage | 8 | Storage Fac. | | | Satisfactory at present time |
| | 9 | Refrig. Units | | | |
| | 10 | Thermometer | | | |
| | 11 | Hazardous Mat. | | | |
| | 12 | Spoils | | | |
| Uten./Equip. | 13 | Wash/ Sanitize | | | |
| | 14 | Equip. Condition | | | |
| | 15 | Utensil Condition | | | |
| | 16 | Storage | | | |
| Employee | 17 | Handwashing | | | |
| | 18 | Employee Hygiene | | | |
| | 19 | Employee Habits | | | |
| | 20 | Food Cert./ Card | | | |
| Water | 21 | Water | | | |
| | 22 | Cross Con. | | | |
| Waste | 23 | Liquid Waste | | | |
| | 24 | Refuse | | | |
| Vermir | 25 | Rodents/ Insects | | | |
| | 26 | Animal/ Fowl | | | |
| Facilities | 27 | Ventilation | | | |
| | 28 | Doors | | | |
| | 29 | Floors | | | |
| | 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): <u>Julia Peters</u> | | Received by (Signature):  | | Date: <u>6/23/24</u> | |
| REHS (Print): <u>David Jackson</u> | | REHS (Signature):  | | Phone: <u>530-841-2114</u> | |