



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: The Clandestino	Permit #
Address: 211 N. Mt. Shasta Blvd., Mount Shasta, CA, 96067	
Permit Holder: NTC Travel and Dreams, LLC	Permit To Operate: <input type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: 408-609-0027	E-mail: NTC@ntc1958.com
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; font-weight: bold; margin-bottom: 10px;">PRE-OPENING INSPECTION CONDUCTED THIS DATE</p> <p>This facility is approved to open with the following conditions:</p> <ul style="list-style-type: none"> - Install all the electrical plug covers. - Install a dispenser for the single-use paper towels, and obtain hand washing soap in a dispenser for the hand washing station. - Repair the baseboard molding as to be sealed to the wall. - Finish sealing the remaining bare wood sections of the bar and wall that were missed in the initial paint work. - The existing domestic refrigerator located in the storage room is conditionally approved for the cooling of beer and soda only. The California Retail Food Code requires that all kitchen equipment to have an NSF or ANSI certification. At any time, this department may require the removal and discontinued use of this refrigeration unit. - Any new equipment must be commercial NSF listed and pre-approved by this department prior to installation into the facility. Equipment installed in the facility without prior approval of this department will be required to be removed. - Obtain a food manager certification within 60 days. All employees must obtain a food handler card within 30 days of hire. - Obtain all necessary licenses and permits from all authorities with jurisdictional oversight of this facility.
	2	Prep./ Service			
	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.			
Uten./Equip.	12	Spoils			
	13	Wash/ Sanitize			
	14	Equip. Condition			
Employee	15	Utensil Condition			
	16	Storage			
	17	Handwashing			
	18	Employee Hygiene			
Water	19	Employee Habits			
	20	Food Cert./ Card			
	21	Water			
Waste	22	Cross Con.			
	23	Liquid Waste			
Vermin	24	Refuse			
	25	Rodents/ Insects			
Facilities	26	Animal/ Fowl			
	27	Ventilation	<input type="checkbox"/>		
	28	Doors	<input type="checkbox"/>		
	29	Floors	<input type="checkbox"/>		
	30	Walls - Ceilings	<input type="checkbox"/>		
	31	Toilet Fac.	<input type="checkbox"/>		
	32	Janitorial Fac.	<input type="checkbox"/>		
Misc.	33	Lighting	<input type="checkbox"/>		
	34	Clothing - Linen	<input type="checkbox"/>		
	35	Signs	<input type="checkbox"/>		
	36	Misc.	<input type="checkbox"/>		

MAJ = Major violation OUT = Out of compliance COS = Corrected on-site
Received By (Print): Nicholas Tena Received by (Signature): _____ Date: 09/09/2024
REHS (Print): Rick Florendo REHS (Signature): _____ Phone: 530-841-2114

Facility Name: The Clandestino

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Received by (Signature):

Date:
09/09/2024

REHS (Print):
Rick Florendo

REHS (Signature):

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