



### 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>Poncho &amp; Lefkowitz</b>	Permit # <b>000376</b>
Address: <b>401 S. Mount Shasta Blvd., Mount Shasta, CA 96067</b>	
Permit Holder: <b>Charles Mahan</b>	Permit To Operate: <input checked="" type="radio"/> Valid <input type="radio"/> Not Valid
Phone: <b>530-638-6940</b>	E-mail: <b>cmahan580@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; margin-top: 0;"><b>ROUTINE INSPECTION CONDUCTED THIS DATE</b></p> <p><b>FACILITY IS ORDERED TO CLOSE FOR THE FOLLOWING REASON:</b></p> <p>17, 31) Facility currently does not have easy access to restroom. The restroom is covered with plastic lining and hasn't been cleaned since the last inspection. Currently, there is no hot water for hand-washing and lacks any form of single-use towels for hand drying. This restroom was noted to be undergoing a remodel in October 2023, which was ordered to be completed immediately. Facility may not have any seating for customers to consume food on the premises without an operation bathroom. Employees have been walking to Berryvale to use the restroom. Facility may not operate without having a functional and clean restroom.</p> <p>36) Observed the pass-thru window to not be self-closing nor does it have a mesh screen. Additionally, the window has been removed completely and can no longer prevent the harborage of insects and vermin. This window can no longer protect the facility from contamination from dust and other forms of outside contamination either. Employees are placing a cutting board in the frame of the window to attempt to create a barrier from outside entrance. Ensure the pass-thru window has a solid or screened window, equipped with a self-closing device. This facility was ordered to repair this window within 90 days of the last inspection performed in October 2023. Repair or replace window immediately to avoid continued facility closure.</p> <p><b>OTHER VIOLATIONS NOT RELATED TO THE CLOSURE:</b></p> <p>20) Facility does not have a current food managers certificate and was provided with a food manager class business card. A fine of \$100 per day of operating without a current food manager certification will be assessed from the 1st day discovered if not obtained within 30 days from this date. <b>2ND NOTICE</b></p> <p>29) Observed damages to floor throughout the facility. Maintain floor to be smooth, cleanable, nonabsorbent, and durable. Repair within 30 days. <b>2ND NOTICE</b></p> <p>30) Observed walls of the interior food facility are damaged exposing bare wood. Maintain walls with a smooth, cleanable, nonabsorbent, and durable finish. Correct within 30 days.</p> <p>Future non-compliance will result in additional fines/fees, an administrative hearing, and possible permit revocation.</p>	
	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				
	15	Utensil Condition				
Employee	16	Storage				
	17	Handwashing		X		
	18	Employee Hygiene				
	19	Employee Habits				
Water	20	Food Cert./ Card		X		
	21	Water				
Waste	22	Cross Con.				
	23	Liquid Waste				
Vermin	24	Refuse				
	25	Rodents/ Insects				
Facilities	26	Animal/ Fowl				
	27	Ventilation				
	28	Doors				
	29	Floors		X		
	30	Walls - Ceilings		X		
	31	Toilet Fac.		X		
	32	Janitorial Fac.				
Misc.	33	Lighting				
	34	Clothing - Linen				
	35	Signs				
	36	Misc.		X		

MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site	
Received By (Print): <b>Travis McCurry</b>	Received by (Signature): _____ Date: <b>09/16/2024</b>
REHS (Print): <b>Rick Florendo]</b>	REHS (Signature): _____ Phone: <b>530-841-2114</b>

**Facility Name:** Poncho & Lefkowitz

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

Received By (Print): Travis McCurry	Received by (Signature):	Date: 09/16/2024
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REHS (Print): Rick Florendo]	REHS (Signature):	Phone: 530-841-2114
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[Empty area for listing health code violations and correction details]

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