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: Papa Murphy's Pizza Permit # 000366									
Address: 1818 Ft Jones Rd., Yreka, CA 96097									
Permit	Hol	der: Larry Hodg	Δ	5		Permit To Operate: X Valid Not Valid			
Phone	-	30-842-0767			E-mail: yrekaca018@gmail.cor				
Food S			96: Dane	14 010-		Finstinu Datas			
	Donald O Connel 07/2029								
Protection Time/ Temp.	1	Food Temp.	MAJ OUT	cos	The marked items represent Health Code violat	tions and must be corrected as follows:			
	2	Prep./ Service	^		ROUTINE INSPECTION COND	DUCTED THIS DATE			
	3000	Storage/ Disp.		 .	4) 01				
		Frozen Food	5		Observed numerous prepackaged cold foods old cold foods at 41F or below. Correct immed				
	5	Pure Food	18	H '''	old cold loods at 411 of below. Collect illimed	s at 411 of below. Correct infinediately.			
	6	Reused Food			Observed a take-out salad at 51F in the same				
	7	Transportation		co	old foods at 41F or below. Voluntarily discarde	d.			
Food Storage	8	Storage Fac.		1/	14) Observed the refrigeration unit mentioned above not holding cold foods to				
	9	Refrig. Units	92 W		14) Observed the refrigeration unit mentioned above not holding cold foods to temperature. Observed the kick panel at the back of this unit damaged and held togeth with tape. Tape is not cleanable and/or durable equipment. Remove immediately. Maintain equipment in good repair and fully serviceable at all times. Repair or correct				
	10	Thermometer							
	11	Hazardous Mat.							
	12	Spoils		im	mediately.				
Uten./Equip.	13	Wash/ Sanitize		20	Observed the plumbing to the walk-in refrige	erator and 3-compartment sink			
	14	Equip. Condition	×		scharging into a mop sink. Ensure the liquid w				
en./	15	Utensil Condition		int	to a floor sink with at least a 1 inch air gap abo				
5	16	Storage		wi	thin 120 days.				
o)	17	Handwashing		20)) Observed demans tiles inside the welk in re	age tiles inside the walk-in refrigerator. Maintain floors as to be eanable, and nonporous. Repair or correct within 90 days.			
Employee	18	Employee Hygiene							
-mp	_	Employee Habits		J.	neous, durable, dicanable, and heriperede. No				
	20	Food Cert./ Card) Observed food, dust, and dirt build-up on the				
Water	21	Water			roughout the facility, particularly the back store				
Š	22	Cross Con.		Cle	eanly manner at all times. Correct immediately	y.			
Waste		Liquid Waste		30)) Observed numerous ceiling panels repaired	renaired, but panels above the walk in			
	24	Refuse			30) Observed numerous ceiling panels repaired, but panels above the walk-in refrigerator remains damaged. Ensure all damaged ceiling panels are replaced or				
Vermin	100000	Rodents/ Insects				ble, durable, smooth, and nonabsorbent. Repair or			
Ve	26	Animal/ Fowl		re	place within 90 days.				
	27	Ventilation							
Se	28	Doors							
Facilities	29	Floors	×						
Fa	30	Walls - Ceilings	×						
	31	Toilet Fac.	\perp						
SC.		Janitorial Fac.		N/	OTE: Jacuard "Escility Inspection Nation" form				
	33	Lighting		IN	NOTE: Issued "Facility Inspection Notice" form.				
	34	Clothing - Linen							
	35	Signs		Щ					
		Misc.		ل_ا					
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site									
Received By (Print): Received by (Signature): Date: Donald O'Conner 09/26/2024									
REHS (Print	Chalyn Dewe	ev		REHS (Signature):	Phone: 530-841-2112			

Facility Name: F	apa Murphy's Pizza	
	The marked items represent Health Code violations and must be cor	rected as follows:
	C	
Received By (Print):	Received by (Signature):	Date:
Dona	ald O'Conner	09/26/2024
REHS (Print):	REHS (Signature):	Phone:
Chalyn De	wey	530-841-2112

Facility Name: Pa	pa Murphy's Pizza			
	The marked items repres	sent Health Code violations and n	nust be corrected as follows:	
		Described by (O'mark	_	
	O'Conner	Received by (Signature):	D	ate: 09/26/2024
REHS (Print): Chalyn Dev		REHS (Signature):		hone: 530-841-2112

Facility Name:	Papa Murphy's Pizza	
	The marked items represent Health Code violations and must be corrected as follows	3:
Received By (Print):	Received by (Signature):	Date:
Neceived by (Print): Dor	nald O'Conner	09/26/2024
REHS (Print): Chalyn [REHS (Signature): Dewey	Phone: 530-841-2112