



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: Strings Italian Cafe	Permit # 000442
Address: 322 W Miner St., Yreka CA 96097	
Permit Holder: Dennis Faust	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: 530-842-7704	E-mail: lisafaust80@yahoo.com
Food Safety Certified Employee: Dennis Faust	Expiration Date: 04/2028

		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: 0;">ROUTINE INSPECTION CONDUCTED THIS DATE</p> <p>3) Observed raw foods stored next to or above ready eat foods in the walk-in freezer. Store ready-to-eat foods above or on separate shelves of raw meats. Corrected onsite.</p> <p>13) Observed 0ppm chlorine concentration at the dishwasher. Maintain 50ppm of chlorine concentration at dishwasher at all times. Utilize test strips daily to test disinfectant concentration daily and as needed. Corrected during inspection.</p> <p>14) Observed foam strips on bottom of the deli-prep cooler lid next to the cook's area. Foam is not an approved material in food preparation area. Maintain materials in food preparation as to be smooth, durable, nonabsorbent, and easily cleanable. Remove strips and replace or correct within 90 days.</p> <p>14) Observed the right door gasket damaged at the food prep table next to the conveyor oven. Maintain equipment in good repair. Repair or correct within 90 days.</p> <p>14) Observed numerous dishwasher racks stored on the ground. Ensure all equipment as stored at least 6" off the floor. Correct immediately.</p> <p>14) Observed the conveyor oven extending pass the type I hood. Ensure all parts of the equipment is at least 6" inside the hood. This distance is to be measured from the inside lip of the hood to outer edge of cooking surface. Repair or correct within 60 days. 2ND NOTICE.</p> <p>A REINSPECTION FEE WILL BE ASSESSED FOR FUTURE NON-COMPLIANCE.</p> <p>29) Observed damaged or missing baseboards by the cooks, warewashing, and food prep areas. Repair or replace within 90 days and ensure baseboards extend at least 4" at the junction of the floor and wall with a 3/8" radius coved at the base.</p> <p>30) Observed the ceiling in the janitorial damaged and insulation materials exposed. Observed paint chipping on the walls in the this area. Maintain ceiling and walls as to be easily cleanable, durable, smooth, and nonabsorbent. Repair or correct within 90 days.</p> <p>NOTE: Issued "Facility Inspection Notice" form.</p>	
	2	Prep./ Service				
	3	Storage/ Disp.		X		X
	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		X		X
	14	Equip. Condition		X		
Employee	15	Utensil Condition				
	16	Storage				
	17	Handwashing				
	18	Employee Hygiene				
Water	19	Employee Habits				
	20	Food Cert./ Card				
Waste	21	Water				
	22	Cross Con.				
Vermin	23	Liquid Waste				
	24	Refuse				
Facilities	25	Rodents/ Insects				
	26	Animal/ Fowl				
	27	Ventilation				
	28	Doors				
	29	Floors		X		
	30	Walls - Ceilings		X		
Misc.	31	Toilet Fac.				
	32	Janitorial Fac.				
	33	Lighting				
	34	Clothing - Linen				
	35	Signs				
	36	Misc.				

MAJ = Major violation OUT = Out of compliance COS = Corrected on-site	
Received By (Print): Lisa Fausts	Received by (Signature): _____ Date: 10/01/2024
REHS (Print): Chalyn Dewey	REHS (Signature): _____ Phone: 530-841-2112

Facility Name: Strings Italian Cafe

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

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Received by (Signature):

Date:
10/01/2024

REHS (Print):
Chalyn Dewey

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