

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: Mt Shasta Elementary 000345							Permit # 000345					
Address: 501 Cedar St Mt Shasta CA												
Permit Holder: Mt Shasta Elementary Permit To Operate: Valid O Not Valid												
Phone	Phone: 530-926-3434 E-mail: eperuzzi@msusd.org											
Food	Safe	ty Certified Employ	/ee: F	ran P	eruzzi		Expiration Date: 03/2025					
MAJ OUT COS						The marked items repre	sent Health Code violations and must be corrected as follows:					
Protection Time/ Temp.	1	Food Temp.										
	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE						
	3	Storage/ Disp.										
	4	Frozen Food										
	5	Pure Food				Satisfac	tory at present time.					
	6	Reused Food										
ď	7	Transportation										
0	8	Storage Fac.										
rage	9	Refrig. Units	1940 - 347 									
Food Storage	10	Thermometer		1								
000	11	Hazardous Mat.										
<u> </u>	12	Spoils	2									
.dir	13	Wash/ Sanitize		3								
Uten./Equip.	14	Equip. Condition										
ten.	15	Utensil Condition										
5	16	Storage										
φ	17											
loye	18	Employee Hygiene										
Employee	1000	Employee Habits		y	_							
	1000	Food Cert./ Card		-	_							
Water	21				_							
3	22			3	_							
Waste		Liquid Waste	_		_							
3	-	Refuse		8	_							
Vermin		Rodents/ Insects			_							
>	-	Animal/ Fowl		3 <u></u> 0	_							
	27	Ventilation			_							
les	-	Doors			_							
Facilities	_	Floors	-		_							
	-	Walls - Ceilings		2	_							
	31	Toilet Fac. Janitorial Fac.			_							
	-			ş	_							
	_	Lighting Clothing - Linen	-		-							
Misc.	-	Signs			_							
Z		Misc.			_							
MAJ =			DUT =	Out of o	compliance	COS = Corrected on-site						
		y (Print): Eran Pe				Received by (Signature):	Date: 10/02/2024					
REHS (Print): REHS (Signature): Phone:												
			000713									

Facility Name:	Mt Shasta Elementary		
	The marked items represent Health Code viola	tions and must be corrected as follows:	
	ς.		
Received By (Print):	Received by (Signature	e): Da	te:
	an Peruzzi		10/02/2024
REHS (Print):	REHS (Signature):		
Rick Flor	enao	Ę	530-841-2114

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Rick Flo	rendo	530-841-2114

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Rick Flo Page 4	rendo			530-841-2114		
Page 4						