## 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	Na	me: Say Chee	se P	izza		Permit # 000401				
Address: 304 Maple St., Mount Shasta, CA										
Permit	Hol	<sup>der:</sup> Steven Ma	pes			Permit To Operate:				
Phone:	5	30-926-2821				E-mail: smapes007@gmail.com				
Food Safety Certified Employee: Steven Mapes  Expiration Date: 09/2028										
MAJ OUT COS The marked items represent Health Code violations and must be corrected as follows:										
emp.	1	Food Temp.	IVII TO	001	000					
	1000	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE				
e/T	3	Storage/ Disp.								
Protection Time/ Temp.	4	Frozen Food				13) Observed numerous working wiping cloths stored on food preparation surfaces				
	5	Pure Food				throughout the kitchen. Store all wiping cloths in sani-bucket with a sanitizing solution of				
	6	Reused Food				200 ppm Quat or 100 ppm Chlorine, when not in use. If the working wiping cloths				
Pro	7	Transportation			-	stored in the sanitizing solution when not in use, then they must be placed in the dirty				
	8	Storage Fac.				laundry after ONE use. 2ND NOTICE				
Food Storage	9	Refrig. Units	100 20		-	29) Observed the paint finish peeling off the floors throughout the kitchen. Maintain				
	10	Thermometer				floors as to be smooth, durabel, easily cleanable, and nonabsorbent. Repair within 60				
poo	11	Hazardous Mat.				days. 2ND NOTICE				
Œ.	12	Spoils								
Uten./Equip.	13	Wash/ Sanitize		×		30) Observed a panel on the wall missing behind the dishwasher, exposing the facility to the plumbing and insulation within. Repair immediately. 2ND NOTICE				
	14	Equip. Condition				the plantibility and insulation within. Repair inimediately. 2ND NOTICE				
en./	15	Utensil Condition								
ž	16	Storage								
Φ	17	Handwashing								
oye	18	Employee Hygiene								
Employee	19	Employee Habits		4						
Ш	20	Food Cert./ Card								
Water	21	Water								
	22	Cross Con.								
Waste	23	Liquid Waste								
40000	24	Refuse								
Vermin		Rodents/ Insects								
Ve	26	Animal/ Fowl		-	5					
		Ventilation	Ш							
Se	28	Doors								
Facilities	29	Floors		X						
Fa	30	Walls - Ceilings		X						
		Toilet Fac.	Ш							
	32	Janitorial Fac.		4						
		Lighting								
Misc.	1	Clothing - Linen								
	CONTRACT AND ADDRESS OF THE PARTY OF THE PAR	Signs								
MA I -		Misc. or violation (	TIT -	Out	of com	apliance COS = Corrected on-site				
			701 -	Out	n con	Received by (Signature):  Date:				
Received By (Print): Received by (Signature): Date:  Steven Mapes 10/02/2024										
REHS (Print): REHS (Signature): Phone: 530-841-2114										

Facility Name:	Say Cheese Pizza	
	The marked items represent Health Code violations and	must be corrected as follows:
,		
	Description (Control	5 .
Received By (Print):	Received by (Signature): even Mapes	Date: 10/02/2024
REHS (Print):	REHS (Signature):	Phone:

530-841-2114

Rick Florendo

Facility Name:	Say Cheese Pizza		
		present Health Code violations and must be co	orrected as follows:
Descripted Des (Detail)		Pagainad by (Signatura):	Deter
	en Mapes	Received by (Signature):	Date: 10/02/2024
REHS (Print): Rick Flo	rendo	REHS (Signature):	Phone: 530-841-2114

530-841-2114

Facility Name:	Say Cheese Pizza	
	The marked items represent Health Code violations and must be corrected as follows	S:
	· ·	
	even Mapes	Date: 10/02/2024
REHS (Print): Rick Flo	REHS (Signature): rendo	Phone: 530-841-2114

530-841-2114