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: Yreka Elk's Lodge 000495						000495						
Address: 322 W Miner Street, Yreka CA 96097												
Yreka Elks Valid							mit To Operate: alid INot Valid					
Phone	Phone: 530-842-1980 E-mail: brianfavero@cot.net											
Food	Safe	ty Certified Emplo	yee: (Coler	man		iration Date: 03/2029					
Food Safety Certified Employee: Coleman Fitzgerald Expiration Date: 03/20 MAJ_OUT_COS The marked items represent Health Code violations and must be corrected as follows:												
Protection Time/ Temp.	1	Food Temp.	WING	001	000							
	2	Prep./ Service			-	ROUTINE INSPECTION CONDUCTED THIS DA	TE					
	3	Storage/ Disp.	8									
	4	Frozen Food				13) Observed slimy mold or build up in the ice machine at the ba	ar area. Maintain					
	5	Pure Food				equipment in clean manner at all times. Dispose all ice and disc						
otec	6	Reused Food				equipment has been cleaned and sanitized according to manufa	ure instruction.					
Pre	7	Transportation				14) Observed a slumbing lock in the 2 server streamt sink and 0 set. I have the						
Food Storage	8	Storage Fac.				14) Observed a plumbing leak in the 3-compartment sink and 2 salad container collect the waste water. Maintain equipment in good repair. Correct or repair waster						
	9	Refrig. Units	1 44 - 20 -			days.						
	10	Thermometer										
000	11	Hazardous Mat.				29) Observed rodent droppings on the floors and hard-to-reach places in the back						
<u> </u>	12	Spoils		-		storage area. Maintain facility in a clean manner at all times. Cle surfaces, including hard-to-reach places immediately.	an and sanitize all					
ġ.	13	Wash/ Sanitize		×		surfaces, moldary nara-to-reach places infinediately.						
Uten./Equip.	14	Equip. Condition		X								
ten.		Utensil Condition										
	16	Storage										
e		Handwashing										
Employee	18	Employee Hygiene										
Emp	-	Employee Habits	8									
		Food Cert./ Card	-	ļ								
Water	1 - C	Water Cross Con.	-									
					2							
Waste	-	Liquid Waste Refuse				NOTE: Issued "Facility Inspection Notice" form.						
1		Rodents/ Insects	-		5							
Vermin	10000	Animal/ Fowl	-									
-	2 2	Ventilation			0							
1953		Doors			-							
ities	1	Floors		X	ð V							
Facilities		Walls - Ceilings		.,		-						
		Toilet Fac.										
Misc.	32	Janitorial Fac.				1						
	33	Lighting										
	-	Clothing - Linen				1						
	35	Signs										
		Misc.										
2			OUT =	Out	of com	npliance COS = Corrected on-site						
8		(Print): Debbie	Rok	es		Received by (Signature): Date	10/08/2024					
REHS	(Print	^{):} Chalyn Dew	/ey			REHS (Signature): Phot	^{ne:} 530-841-2112					
-							Last modified 4/12/2022					

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	The marked items repi	resent Health Code violations a	and must be corrected as follow	/S:
				_
Received By (Print):	bbie Rokes	Received by (Signature):		Date: 10/08/2024
REHS (Print):		REHS (Signature):		Phone:
Chalyn D	ewey			530-841-2112

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Chalyn	Dewey		530-841-2112
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REHS (Print): Chalyn [REHS (Signature):		Phone:
Chaiyil L				530-841-2112