



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: El Ranchito	Permit # 000215
Address: 117 S Main Street Dorris CA	
Permit Holder: Ignacio and Graciella Ramirez	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone:	E-mail: gracielayignacio@gmail.com
Food Safety Certified Employee: Ignacio Ramirez	Expiration Date: 10/2025

		MAJ	OUT	COS	
					The marked items represent Health Code violations and must be corrected as follows:
Protection Time/ Temp.	1	Food Temp.			
	2	Prep./ Service			
	3	Storage/ Disp.			
	4	Frozen Food			
	5	Pure Food			
	6	Reused Food			
	7	Transportation			
Food Storage	8	Storage Fac.			
	9	Refrig. Units			
	10	Thermometer			
	11	Hazardous Mat.			
	12	Spoils			
Uten./Equip.	13	Wash/ Sanitize			
	14	Equip. Condition		X	
	15	Utensil Condition			
Employee	16	Storage			
	17	Handwashing			
	18	Employee Hygiene			
	19	Employee Habits			
Water	20	Food Cert./ Card			
	21	Water			
Waste	22	Cross Con.			
	23	Liquid Waste			
Vermin	24	Refuse			
	25	Rodents/ Insects			
Facilities	26	Animal/ Fowl			
	27	Ventilation			
	28	Doors			
	29	Floors		X	
	30	Walls - Ceilings		X	
	31	Toilet Fac.			
	32	Janitorial Fac.			
Misc.	33	Lighting			
	34	Clothing - Linen			
	35	Signs			
	36	Misc.			

ROUTINE INSPECTION CONDUCTED ON THIS DATE

14) Observed the finish worn off on the shelving in the dishwashing area and is no longer smooth, durable, cleanable, and non-absorbent. Replace or repair in 90 days.

29) Observed food debris and dirt throughout the facility in the hard to reach places. Clean as soon as possible.

30) Observed buildup of dirt, food stains and splatters throughout the entire facility in the hard to reach places. Clean walls in food storage and food prep areas as soon as possible.

MAJ = Major violation OUT = Out of compliance COS = Corrected on-site
Received By (Print): Ignacio Ramirez Received by (Signature): _____ Date: 10/10/2024
REHS (Print): Alexa Roche REHS (Signature): _____ Phone: 530-841-2117

Facility Name: El Ranchito

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

Received By (Print):
Ignacio Ramirez

Received by (Signature):

Date:
10/10/2024

REHS (Print):
Alexa Roche

REHS (Signature):

Phone:
530-841-2117

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