## **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: McCloud Elementary School Permit # 000313												
Addres	ss:	322 Hamilton										
Permit	Hol	der:	- Fai	<u> </u>	5000	Permit To Operate:						
	grame (r	McCloud E	lem	enta	ry S							
Phone		530-964-2133				E-mail: nmay@sisnet.ssku.k12.ca.us						
Food Safety Certified Employee: Norman May  Expiration Date: 12/2026												
				OUT		The marked items represent Health Code violations and must be corrected as follows:						
Protection Time/ Temp.	1	Food Temp.		X	X							
	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE						
	3	Storage/ Disp.										
	4	Frozen Food				1) Observed cut broccoli served at 54 degrees F. Hold all cold foods at 41 degrees colder. Hold all hot foods at 135 degrees F or hotter. Corrected during inspection.						
ction	5	Pure Food										
otec	6	Reused Food										
ď	7	Transportation				13) Observed dishwasher dispensing 0 ppm Chlorine sanitizer. This machine is required to dispense a minimum of 50 ppm Chlorine for proper mechanical sanitization.						
Ф	8	Storage Fac.				Manually sanitize wares utilizing the 3 compartment sink until dishwasher is repaired.						
orag	9	Refrig. Units				Utilize test strips to measure Chlorine concentration to ensure that it is dispensing						
Food Storage	10	Thermometer				properly, daily.						
-000	delle	Hazardous Mat.		1		26) Observed school staff members entering the kitaban to pick up food that was						
ш	12	Spoils				36) Observed school staff members entering the kitchen to pick up food that was prepared and prepackaged in "to-go" containers. All unnecessary personnel (especially						
ip.	13	Wash/ Sanitize		X		those not designated as kitchen staff) are permitted to be in the kitchen during operating						
Uten./Equip.	14	Equip. Condition				hours. Corrected during inspection.						
ten.		Utensil Condition										
Ď	16	Storage										
e	17	Handwashing										
Employee	18	Employee Hygiene										
-m	100	Employee Habits			-							
	20	Food Cert./ Card										
Water		Water										
>	22	Cross Con.										
Waste		Liquid Waste										
	24	Refuse										
Vermin	Park Carry	Rodents/ Insects										
Ve	26	Animal/ Fowl										
	27	Ventilation										
Se	28	Doors				-						
Facilities	29	Floors										
Fa	30	Walls - Ceilings										
	31	Toilet Fac.										
		Janitorial Fac.										
	33	Lighting										
Misc.		Clothing - Linen	Ш									
	35	Signs										
		Misc.		X	X							
			)UI =	Out	of con	npliance COS = Corrected on-site						
Receive	u B)	(Print): Normar	Ma <sub>1</sub>	y		Received by (Signature): Date: 10/24/2024						
REHS (	Print	Rick Florence	0			REHS (Signature): Phone: 530-841-2114						

Facility Name:	McCloud Elementary School	
	The marked items represent Health Code violations	and must be corrected as follows:
Received By (Print):	Received by (Signature):	Date:
No	orman May	10/24/2024
REHS (Print):	REHS (Signature):	Phone:

530-841-2114

Rick Florendo

Facility Name:	McCloud Elementary School	
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	B 1 1 20 1 1	
Received By (Print): Nori	Received by (Signature): man May	Date: 10/24/2024
REHS (Print):	REHS (Signature):	Phone:

530-841-2114

Rick Florendo

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Received By (Print):	man May	Received by (Signature):	Date: 10/24/2024
REHS (Print): Rick Flor	rendo	REHS (Signature):	Phone: 530-841-2114

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