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: Pipeline C	raft 7	Гарѕ	& K	itchen Permit # 000570					
Address: 320 W. Mount Shasta Blvd., Mount Shasta, CA, 96067											
Permit Holder:Permit To Operate:											
	Black Dog Project Inc.										
Phone:	330-3 to-0020 IJ@plpeillecrattaps.com										
Food S	Food Safety Certified Employee: Jessica Stewart Expiration Date: 09/2027										
			-	OUT		The marked items represent Health Code violations and must be corrected as follows:					
b.	1	Food Temp.									
Protection Time/ Temp.	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE					
	3	Storage/ Disp.		X		Observed prepackaged food stored on the floor of the walk-in refrigerator. Store all food at least 6" off the ground. Correct immediately.					
Ē	4	Frozen Food									
ction	5	Pure Food									
otec	6	Reused Food				40.01					
P	7	Transportation				14) Observed a pan to catch the leaks dripping from the compressor in the walk-in					
a)	8	Storage Fac.				freezer. Maintain all equipment in a clean and serviceable condition. Repair within 90 days.					
rage	9	Refrig. Units				aayo.					
Food Storage	10	Thermometer				30) Observed excessive damage to the walls in the ware-washing and food preparation					
poo	11	Hazardous Mat.				areas. These surfaces are to be maintained to be smooth, durable, non-absorbent, and					
ш	12	Spoils				easily cleanable at all times. Repair within 90 days.					
<u>o</u>	13	Wash/ Sanitize									
Uten./Equip.	14	Equip. Condition		X							
en./	15	Utensil Condition									
5	16	Storage									
Ф	17	Handwashing									
Employee	18	Employee Hygiene									
ldm	19	Employee Habits									
ш	20	Food Cert./ Card									
Water	21	Water									
	22	Cross Con.									
Waste	23	Liquid Waste									
	24	Refuse									
ermin/	100	Rodents/ Insects									
Ver	26	Animal/ Fowl									
	27	Ventilation									
S	28	Doors			8						
Facilities	29	Floors									
Fac	30	Walls - Ceilings		X							
	31	Toilet Fac.									
	32	Janitorial Fac.									
Misc.	33	Lighting									
	34	Clothing - Linen									
	35	Signs									
		Misc.									
			UT =	Out	of com	pliance COS = Corrected on-site					
Received By (Print): Received by (Signature): Date: LJ Stewart 11/18/2024											
REHS (Print): Rick Florend	0			REHS (Signature): Phone: 530-841-2114					

Facility Name:	Pipeline Craft Taps & Kitchen	
	The marked items represent Health Code violations and must be corrected	as follows:
Received By (Print):	Received by (Signature): Stewart	Date: 11/18/2024
REHS (Print):	REHS (Signature):	Phone:

530-841-2114

Rick Florendo

Facility Name: Pipeli	ne Craft Taps & Kitchen	
The	e marked items represent Health Code violations and must be corrected as follo	DWS:
•		
	· ·	
Received By (Print):	Received by (Signature):	Date:
LJ Stewart		11/18/2024
RFHS (Print)	REHS (Signature):	Phone:

530-841-2114

Rick Florendo

Facility Name:	Pipeline Craft Taps & Kitchen	
	The marked items represent Health Code violations and must be corrected as follows	:
•		
Received By (Print):	Received by (Signature):	Date:
	Stewart	11/18/2024
REHS (Print): Rick Flo	REHS (Signature): Forendo	Phone: 530-841-2114

530-841-2114