



## 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: Spill the Beans Permit # 000781											
Addres					McC	loud, CA 96057		provinces for the second			
Permit		der:		- 65.0		,		Permit To Operate:			
		Traci's Caf	e LL	С				Valid			
Phone	Phone: 360-531-4910 E-mail: tracishirley17@gmail.com										
Food S	afe	ty Certified Employ	/ee:		Tr	aci Shirley		Expiration Date: 05/2029			
			MAJ	OUT		0.76	rked items represent Health Code violat	CONTRACTOR ASSOCIATION			
Protection Time/ Temp.	1	Food Temp.				_	OUTING MODEOTION COND	LIOTED THIS DATE			
	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE					
	3	Storage/ Disp.									
	4	Frozen Food									
	5	Pure Food									
	6	Reused Food				SATISFACTORY AT PRESENT TIME					
	7	Transportation									
Food Storage	8	Storage Fac.									
	9	Refrig. Units									
	10	Thermometer									
	11	Hazardous Mat.									
ш	12	Spoils									
<u>o</u>	13	Wash/ Sanitize									
Uten./Equip.	14	Equip. Condition									
l'le	15	Utensil Condition									
Ţ	16	Storage									
a)	0.000	Handwashing									
Employee	18	Employee Hygiene									
mple	19	Employee Habits									
Ш	20	Food Cert./ Card									
ter	21	Water									
Water	22	Cross Con.									
Waste	23	Liquid Waste									
Wa	24	Refuse									
Vermin	25	Rodents/ Insects									
Ver	26	Animal/ Fowl									
	27	Ventilation									
S	28	Doors									
Facilities	29	Floors									
Fac	30	Walls - Ceilings									
300	31	Toilet Fac.									
	32	Janitorial Fac.									
	33	Lighting									
Misc.	34	Clothing - Linen									
	35	Signs									
	36	Misc.									
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site											
Received By (Print): Received by (Signature): Date:  Traci Shirley 11/13/2024											
REHS (Print): Rick Florendo  REHS (Signature): Phone: 530-841-2114											

Facility Name:	Spill the Beans		
	The marked items rep	resent Health Code violations and mu	ust be corrected as follows:
		K.	
Received By (Print):		Received by (Signature):	Date:
Tra	aci Shirley	<del>.</del> . ,	11/13/2024
REHS (Print):		REHS (Signature):	Phone:

530-841-2114

Rick Florendo

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