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: Alua's Thrive Bar 000659									
Addres	SS:	315 Chestnut	St. N	loun	t Sh	asta, CA			
Permit	Hol	^{der:} Alua Probi	otics	, LL	2	Permit To Operate: Valid Not Valid			
Phone	Ę	530-918-3388				E-mail: nion@aluakombucha.com			
Food S		ty Certified Employ	/ee: N	lion	Chai				
		D. 150 15	The marked items represent Health Code violations and must be corrected as follows:						
Protection Time/ Temp.	1	Food Temp.	MAJ	OUT	COS	The marked items represent nealth code violations and must be corrected as follows.			
	2000	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE.			
		Storage/ Disp.							
		Frozen Food							
	200	Pure Food				13) Observed working wiping cloths placed on food prep surfaces. Store all these			
	10000	Reused Food	1			working cloths in a sanitizer solutions of 100 ppm Chlorine or 200 ppm Quat. Corrected			
Pro		Transportation				during inspection.			
	1000	Storage Fac.				40) OL			
age		Refrig. Units	100 20	3	-	13) Observed sani-bucket with 0 ppm Quat. Maintain a concentration of 200 ppm Q in these buckets. Utilize test strips to measure this concentration. Corrected during			
Food Storage	100000	Thermometer	+		ž.	inspection.			
	3 3	Hazardous Mat.			0				
		Spoils			į.				
		Wash/ Sanitize		X	0				
quip	2000	Equip. Condition		,,					
Uten./Equip.	-	Utensil Condition							
Ute		Storage							
		Handwashing							
Employee	-	Employee Hygiene	1						
nplc		Employee Habits							
ш		Food Cert./ Card							
ter	21	Water							
Water	22	Cross Con.							
ste	23	Liquid Waste							
Waste	24	Refuse				T			
Vermin	25	Rodents/ Insects							
Ver	26	Animal/ Fowl							
	27	Ventilation							
S	28	Doors							
Facilities	29	Floors		X					
Fac	30	Walls - Ceilings							
	31	Toilet Fac.							
	32	Janitorial Fac.							
	33	Lighting							
Misc	34	Clothing - Linen							
	35	Signs							
		Misc.							
			OUT =	Out	of com	pliance COS = Corrected on-site			
Received By (Print): Received by (Signature): Date: Bianca Garza 12/09/2024									
REHS (Print): REHS (Signature): Phone: 530-841-2114									

Facility Name:	Alua's Thrive Bar						
	The marked items represent Health 0	Code violations and must be corrected as follo	ws:				
Received By (Print):		y (Signature):	Date:				
Bia	anca Garza		12/09/2024				
REHS (Print):	REHS (Sig	nature).	Phone:				

530-841-2114

Rick Florendo

Facility Name:	Alua's Thrive Bar		
	The marked items	represent Health Code violations and must be co	prrected as follows:
Received By (Print):		Received by (Signature):	Date:
Bian	ca Garza		12/09/2024
REHS (Print): Rick Flo	rendo	REHS (Signature):	Phone: 530-841-2114

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		x	
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Biar	nca Garza		12/09/2024
REHS (Print): Rick Flor	rendo	REHS (Signature):	Phone: 530-841-2114

530-841-2114