



### 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: <b>Best Western Treehouse</b>	Permit # <b>000467</b>
Address: <b>111 Morgan Way, Mount Shasta, CA 96067</b>	
Permit Holder: <b>Good Nite Inn, Inc.</b>	Permit To Operate: <input checked="" type="radio"/> Valid <input type="radio"/> Not Valid
Phone: <b>530-926-3101</b>	E-mail: <b>fbm@treehouseshasta.com</b>
Food Safety Certified Employee: <b>Jessie Woods</b>	Expiration Date: <b>01/2029</b>

		MAJ	OUT	COS		
					The marked items represent Health Code violations and must be corrected as follows:	
Protection Time/Temp.	1	Food Temp.			<p style="text-align: center; font-weight: bold; margin-bottom: 20px;">ROUTINE INSPECTION CONDUCTED THIS DATE</p> <p>3) Observed raw meats stored next to and above ready-to-eat foods. Store all raw meats below ready-to-eat foods. Corrected during inspection.</p> <p>11) Observed 2 bottles of unlabeled chemicals in spray bottles near the ware-washing area. Observed 1 bottle of chemical that appeared to be glass cleaner in a spray bottle labeled for air freshener. Label all chemicals that have been portioned from their original containers. Never mix chemicals or re-purpose chemical bottles for different substances.</p>	
	2	Prep./ Service				
	3	Storage/ Disp.		X		X
	4	Frozen Food				
	5	Pure Food				
	6	Reused Food				
	7	Transportation				
Food Storage	8	Storage Fac.				
	9	Refrig. Units				
	10	Thermometer				
	11	Hazardous Mat.		X		X
	12	Spoils				
Uten./Equip.	13	Wash/ Sanitize				
	14	Equip. Condition				
	15	Utensil Condition				
	16	Storage				
Employee	17	Handwashing				
	18	Employee Hygiene				
	19	Employee Habits				
	20	Food Cert./ Card				
Water	21	Water				
	22	Cross Con.				
Waste	23	Liquid Waste				
	24	Refuse				
Vermin	25	Rodents/ Insects				
	26	Animal/ Fowl				
Facilities	27	Ventilation				
	28	Doors				
	29	Floors				
	30	Walls - Ceilings				
	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): <b>Jessie Woods</b>	Received by (Signature): _____ Date: <b>01/21/2025</b>
REHS (Print): <b>Rick Florendo</b>	REHS (Signature): _____ Phone: <b>530-841-2114</b>

**Facility Name:** Best Western Treehouse

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

Received By (Print): <b>Jessie Woods</b>	Received by (Signature):	Date: <b>01/21/2025</b>
---	--------------------------	----------------------------

REHS (Print): <b>Rick Florendo</b>	REHS (Signature):	Phone: <b>530-841-2114</b>
---------------------------------------	-------------------	-------------------------------

**Facility Name:** Best Western Treehouse

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

[Empty area for listing health code violations and correction details]

Received By (Print): <b>Jessie Woods</b>	Received by (Signature):	Date: <b>01/21/2025</b>
---	--------------------------	----------------------------

REHS (Print): <b>Rick Florendo</b>	REHS (Signature):	Phone: <b>530-841-2114</b>
---------------------------------------	-------------------	-------------------------------

**Facility Name:** Best Western Treehouse

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

Received By (Print): Jessie Woods	Received by (Signature):	Date: 01/21/2025
--------------------------------------	--------------------------	---------------------

REHS (Print): Rick Florendo	REHS (Signature):	Phone: 530-841-2114
--------------------------------	-------------------	------------------------