### OFFICIAL FOOD INSPECTION REPORT



: 2 GUYS AND A GRILL : INDERVEER SINGH **Facility Name** Owner 3525 HWY 99W Site Address : 2914 SHASTA VIEW DR Owner Address : EE0000005 - Tia Branton Facility ID FA0001718 Inspector PR0003375 (530) 527-8020 Record ID Inspector Phone : 1628 - Food Vehicle Prepared Food PT0003612 License/Permit Number Program:

: 60 min.

Person in Charge

11/2/2023

Inspection Date DA0011710 Inspection Number

Purpose of Inspection 102 - Routine Inspection

: 05 - Reinspection Required Result

Total Inspection Time

An inspection of your property revealed the following violations. Please note the date for reinspection. Thank you for your cooperation.

Inspection Violations

### HOT AND COLD POTABLE WATER AVAILABLE - 16 21

"Comply by Date" Not

Not In Compliance

Specified

J. Branton

Violation Description:

An adequate, protected, pressurized, potable supply of hot water and cold water shall be provided at all times. (113953(c), 114099.2(b) 114101(a), 114189, 114192, 114192.1, 114195)

Corrective Description:

Inspector Comments:

Mobile set up but closed at time of inspection due to generator issues. Hot water was not available at inspection. Mobile must have hot water for hand washing any time food being being sold.

Not In Compliance **MOBILE SIGNAGE - 16 39B** "Comply by Date" Not Specified

Violation Description:

(a) Except as specified in subdivision (c), the business name or name of the operator, city, state, ZIP Code, and name of the permittee, if different from the name of the food facility, shall be legible, clearly visible to consumers, and permanently affixed on the consumer side of the mobile food facility and on a mobile support unit. (114299) (b) The business name shall be in letters at least 3 inches high. Letters and numbers for the city, state, and ZIP Code shall not be less than one inch high. The color of each letter and number shall contrast with its background. (c) Notwithstanding subdivision (a), motorized mobile food facilities and mobile support units shall have the required identification on two sides.

Corrective Description:

Inspector Comments:

REPEAT VIOLATION: MUST HAVE CORRECT SIGNAGE ON SERVING SIDE OF MOBILE.

| Overall | Ins  | pection | Comm    | ents  |
|---------|------|---------|---------|-------|
| Overan  | 1113 | pecuon  | COIIIII | ciico |

Mobile unit not allowed to participate in "Special Event" until proper permit is aquired.

| eceived By: | Date | Tia Branton | Date |
|-------------|------|-------------|------|

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : AFC SUSHI @ RALEY'S #233 Owner : AFC SUSHI @ RALEYS #233

Site Address : 725 S MAIN ST Owner Address : 19700 MARINER AVE

Facility ID : FA0000486 Inspector : EE0000021 - Amanda Young

Record ID : PR0000087 Inspector Phone : Not Specified

License/Permit Number : 2001-16F-1 Program: : 1623 - Restaurant <2000 Sq. Feet

:

Inspection Date : 11/3/2023 Total Inspection Time : 20 min.
Inspection Number : DA0011712

Inspection Number : DA0011712
Purpose of Inspection : 102 - Routine Inspection
Result : 01 - Meets Standards

| Inspection Violations  No violations cited.                               |               |              |      |
|---|---------------|--------------|------|
| Overall Inspection Comments Sushi area looks good and unit in temperature | e, thank you! |              |      |
|   |               | ad yt        | ,    |
| Received By:  | Date          | Amanda Young | Date |

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : BURGER SHACK Owner : ANAIZA NOVOA Site Address : 7834 HIGHWAY 99 E Owner Address : 7834 HWY 99E

Facility ID : FA0000505 Inspector : EE0000021 - Amanda Young

Record ID : PR0000111 Inspector Phone : Not Specified

License/Permit Number : 2035-16F-1 Program: : 1623 - Restaurant <2000 Sq. Feet

:

Inspection Date : 11/16/2023 Total Inspection Time : 45 min.

Inspection Number : DA0011744

Inspection Number : DA0011744

Purpose of Inspection : 102 - Routine Inspection

Result : 01 - Meets Standards

### Inspection Violations No violations cited. Overall Inspection Comments Facility is very clean and well maintained, keep it up! Thank you! Received By: Date Amanda Young Date

### OFFICIAL FOOD INSPECTION REPORT



CARNICERIA DOS AMIGOS : CARNICERIA DOS AMIGOS **Facility Name** Owner 2003 SOLANO ST

: 204 SAMSON AVE Site Address Owner Address

: EE0000005 - Tia Branton Facility ID FA0000574 Inspector

PR0000192 (530) 527-8020 Record ID Inspector Phone

: 2164-16F-1 : 1623 - Restaurant <2000 Sq. Feet License/Permit Number Program:

Inspection Date 11/6/2023 Total Inspection Time : 60 min.

DA0011718 Inspection Number : 05 - Reinspection Required Result Purpose of Inspection 102 - Routine Inspection

An inspection of your property revealed the following violations. Please note the date for reinspection. Thank you for your cooperation.

Inspection Violations

Person in Charge

Not In Compliance **FOOD TRAINING - 16 1** "Comply by Date" Not

Specified

Violation Description:

All food employees shall have adequate knowledge of and be trained in food safety as it relates to their assigned duties. (113947) Food facilities that prepare, handle or serve non-prepackaged potentially hazardous food, shall have an employee who has passed an approved food safety certification examination. (113947-113947.1)

Corrective Description:

Inspector Comments:

Must have ALL FOOD HANDLER AND MANAGERS CARDS AVAILABLE FOR INSPECTION!!!!

ALL FOOD CONTACT SURFACES SHALL BE KEPT CLEANED AND SANITIZED - 16 14

"Comply by Date" Not

Not In Compliance

Specified

Violation Description:

All food contact surfaces of utensils and equipment shall be clean and sanitized. (113984(e), 114097, 114099.1, 114099.4, 114099.6, 114101 (b-d), 114105, 114109, 114111, 114113, 114115 (a, b, d), 114117, 114125(b), 114141)

Corrective Description:

Inspector Comments:

please scrub walk-in refrigerator.

ALL FOOD SHALL BE SEPERATED AND PROTECTED FROM CONTAMINATION - 16 27

"Comply by Date" Not

Not In Compliance

Specified

Violation Description:

All food shall be separated and protected from contamination. (113984 (a, b, c, d, f), 113986, 114060, 114067(a, d, e, j), 114069(a, b), 114077, 114089.1 (c), 114143 (c))

Date

Corrective Description:

Inspector Comments:

All containers in refrigerator must have lids

| Overall Inspection Con | nments |
|------------------------|--------|
|------------------------|--------|

Re-inspection in one week.

|             | Branton |      |
|-------------|---------|------|
| Tia Branton |         | Date |

Received By

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : CASA RAMOS MEXICAN RESTAURANT Owner : LARRY BIRDSON

Site Address : 2001 N MAIN ST : 185 MAIN ST Owner Address

: FA0000507 : EE0000021 - Amanda Young Facility ID Inspector

: PR0000113 : Not Specified Record ID Inspector Phone

License/Permit Number : 2038-16F-1 Program: : 1624 - Restaurant 2000 Sq.

: Feet-6000 Sq. Feet

Inspection Date : 11/13/2023 Total Inspection Time : 60 min. : DA0011734

Inspection Number : 01 - Meets Standards Result Purpose of Inspection · 102 - Routine Inspection

| Inspection Violations                                 |      |  |
|---|------|--|
| No violations cited.                                  |      |  |
|   |      |  |
| Overall Inspection Comments                           |      |  |
| vician mopection comments                             |      |  |
| Facility looks good and all units in temp, thank you! |      |  |
|   |      |  |
|   | ad y |  |

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : CHATA CHURRO Owner : JUAN HERNANDEZ

Site Address : 710 4TH ST Owner Address : 710 4TH ST

Facility ID : FA0001669 Inspector : EE0000021 - Amanda Young

Record ID : PR0003248 Inspector Phone : Not Specified

License/Permit Number : PT0003484 Program: : 1623 - Restaurant <2000 Sq. Feet

:

Inspection Date : 11/7/2023 Total Inspection Time : 60 min.
Inspection Number : DA0011721

Result : 01 - Meets Standards

Purpose of Inspection : 106 - Pre-Opening Inspection

| Inspection Violations                      |      |              |      |
|--|------|--------------|------|
| No violations cited.                       |      |              |      |
| Overall Inspection Comments Clear to open! |      |              |      |
| Best of luck on the endeavors.             |      |              |      |
|  |      | ad y         |      |
| Received By:                               | Date | Amanda Young | Date |

Person in Charge

Received By:

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : CORNING SENIOR CENTER Owner : CITY OF CORNING

Site Address : 1015 4TH AVE Owner Address : 1015 4TH AVE

Facility ID : FA0000516 Inspector : EE0000005 - Tia Branton

Record ID : PR0000123 Inspector Phone : (530) 527-8020

Date

License/Permit Number : 2052-16F-1 Program: : 1635 - School Cafeteria/Senior

: Program

Inspection Date : 11/30/2023 Total Inspection Time : 60 min.

Inspection Number : DA0011762

Purpose of Inspection : 102 - Routine Inspection Result : 01 - Meets Standards

| Inspection Violations            |  |
|----------------------------------|--|
| •                                |  |
| No violations cited.             |  |
|                                  |  |
| Overall Inspection Comment       |  |
| No violations noted. All food de | livered from Red Bluff Senior Nutrition/JV Hall kitchen. All food dispensed immediately so no need for hot/cold holding. |
|                                  | 2. Baanton   |

Tia Branton

License/Permit Number

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : DOLLAR GENERAL #14507 Owner : DOLGEN CALIFORNIA, LLC

Site Address : 7921 HWY 99E Owner Address : 5601 GRANITE PKWY 260

Facility ID : FA0001197 Inspector : EE0000021 - Amanda Young

Record ID : PR0002079 Inspector Phone : Not Specified

: Feet No Prep

Inspection Date : 11/16/2023 Total Inspection Time : 45 min.

Inspection Number : DA0011743

Inspection Number : DA0011743

Purpose of Inspection : 102 - Routine Inspection

Result : 01 - Meets Standards

| Inspection Violations  No violations cited.                          |                        |                |      |
|--|------------------------|----------------|------|
| Overall Inspection Comments Store is very clean and well maintained, | keep it up! Thank you! |                |      |
| Received By:   | Date                   | — Amanda Young | Date |

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : DUTCH BROS COFFEE Owner : DUTCH BROS, LLC
Site Address : 669 EDITH AVE Owner Address : 110 SW 4TH ST

Facility ID : FA0001660 Inspector : EE0000005 - Tia Branton

Record ID : PR0003218 Inspector Phone : (530) 527-8020

License/Permit Number : PT0003454 Program: : 1640 - Limited Food Prep (Coffee

: Stand/Hotel)

Inspection Date : 11/7/2023 Total Inspection Time : 60 min.

Inspection Number : DA0011719

Inspection Number : DAUUTTT9

Result : 01 - Meets Standards

| Purpose of Inspection : 106 - Pre-Opening Inspection | on   | Result      | . 01 - Meets Standards |      |
|--|------|-------------|------------------------|------|
| Inspection Violations  No violations cited.          |      |             |                        |      |
| Overall Inspection Comments Okay to open facility    |      |             |                        |      |
|  |      |             | Baanton                |      |
| Received By:   | Date | Tia Branton |                        | Date |

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : DUTCH BROS. COFFEE #2 Owner : DUTCH BROS. COFFEE #2

Site Address : 796 ANTELOPE BLVD Owner Address : PO BOX 492526

Facility ID : FA0001464 Inspector : EE0000021 - Amanda Young

Record ID : PR0002588 Inspector Phone : Not Specified

License/Permit Number : PT0002798 Program: : 1640 - Limited Food Prep (Coffee

: Stand/Hotel)

Inspection Date : 11/8/2023 Total Inspection Time : 30 min.
Inspection Number : DA0011724

Inspection Number : DA0011724

Purpose of Inspection : 102 - Routine Inspection

Result : 01 - Meets Standards

## Inspection Violations No violations cited. Overall Inspection Comments Facility looks great and all units in temp, thank you! Received By: Date Amanda Young Date

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : DUTCH BROS. COFFEE Owner : D M MAIN STREET INVESTMENTS INC

Site Address : 430 S MAIN ST Owner Address : P O BOX 492526

Facility ID : FA0000677 Inspector : EE0000021 - Amanda Young

Record ID : PR0000330 Inspector Phone : Not Specified

License/Permit Number : 2370-16F-1 Program: : 1640 - Limited Food Prep (Coffee

: Stand/Hotel)

Inspection Number : DA0011716
Purpose of Inspection : 102 - Routine Inspection

Result : 01 - Meets Standards

| Inspection Violations                         |                  |                  |      |
|---|------------------|------------------|------|
| No violations cited.                          |                  |                  |      |
|   |                  |                  |      |
|   |                  |                  |      |
| Overall Inspection Comments                   |                  |                  |      |
| Facility looks great and all units in tempera | ture, thank you! |                  |      |
| Staff were very helpful today, thank you.     |                  |                  |      |
|   |                  |                  |      |
|   |                  | adi ys           | ,    |
| Received By:                                  | Date             | <br>Amanda Young | Date |

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : EAST COAST FOODS Owner : TROY CRUSE Site Address : 1315 SOLANO ST B Owner Address : 4650 DAWSON RD

: EE0000005 - Tia Branton : FA0001638 Facility ID Inspector

: PR0003236 : (530) 527-8020 Record ID Inspector Phone

License/Permit Number : PT0003472 : 1630 - Catering Services With Program:

: Restaurant

| Person in Charge                     | :                          |      |                       | : Restaurant           |      |
|--------------------------------------|----------------------------|------|-----------------------|------------------------|------|
| Inspection Date                      | : 11/2/2023                |      | Total Inspection Time | : 30 min.              |      |
| Inspection Number                    | : DA0011708                |      | Desuit                | · 01 - Meets Standards |      |
| Purpose of Inspection                | : 102 - Routine Inspection |      | Result                | : 01 - Meets Standards |      |
| Inspection Viola  No violations cite | d.                         |      |                       |                        |      |
| Overall Inspection ( No changes.     | Comments                   |      |                       |                        |      |
|                                      |                            |      | <i>(</i> ).           | 3 Ranton               |      |
| Received By:                         |                            | Date | Tia Branton           |                        | Date |

Person in Charge

Received By:

### OFFICIAL FOOD INSPECTION REPORT



Date

Facility Name : EAST COAST FOODS Owner : TROY CRUSE
Site Address : 1315 SOLANO ST B Owner Address : 4650 DAWSON RD

Facility ID : FA0001638 Inspector : EE0000005 - Tia Branton

Record ID : PR0003174 Inspector Phone : (530) 527-8020

License/Permit Number : PT0003407 Program: : 1628 - Food Vehicle Prepared Food

:

Inspection Date : 11/2/2023 Total Inspection Time : 60 min.
Inspection Number : DA0011709

Inspection Number : DA0011709

Purpose of Inspection : 102 - Routine Inspection

Result : 01 - Meets Standards

Date

| — Inspection Violations —                                      |   |  |
|--|---|--|
| No violations cited.   |   |  |
|  |   |  |
| Overall Inspection Comments Please make sure hot water is turn | ed on and working before selling food. Trailer very clean, thank you. |  |
| r loade make dare not water le tarn                            |   |  |
|  | 2. Baanton  |  |

Tia Branton

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : EL PINCHE TACO Owner : ADRIANA VALDOVINES
Site Address : 3070 HWY 99W Owner Address : 5101 TOOMES AVE

Facility ID : FA0001582 Inspector : EE0000021 - Amanda Young

Record ID : PR0002769 Inspector Phone : Not Specified

License/Permit Number : PT0002991 Program: : 1628 - Food Vehicle Prepared Food

Total Inspection Time : 60 min.

Inspection Number : DA0011751
Purpose of Inspection : 102 - Routine Inspection

Result : 03 - Minor Violations

An inspection of your property revealed the following violations. Please note the date for reinspection. Thank you for your cooperation.

Inspection Violations

Person in Charge Inspection Date

### **ALL VENTILATION SHALL MEET REQUIREMENTS - 16 38B**

: 11/17/2023

"Comply by Date" Not Specified Not In Compliance

**`** 

Violation Description:

Exhaust hoods shall be provided to remove toxic gases, heat. grease, vapors and smoke and be approved by the local building department. Canopy-type hoods shall extend 6# beyond all cooking equipment. All areas shall have sufficient ventilation to facilitate proper food storage. Toilet rooms shall be vented to the outside air by a screened openable window, an air shaft, or a light-switch activated exhaust fan, consistent with local building codes. (114149, 114149.1)

Corrective Description:

Inspector Comments:

Please get ANSUL system and fire extinguishers certified. Last certification was done 2+ years ago.

Obtenga la certificación del sistema ANSUL y de los extintores. La última certificación se realizó hace más de 2 años.

### ALL NONFOOD CONTACT SURFACES SHALL BE KEPT CLEAN - 16 33

"Comply by Date" Not

Not In Compliance

Specified

Violation Description:

All nonfood contact surfaces of utensils and equipment shall be clean. (114115 (c))

Corrective Description:

Inspector Comments:

Time to deep clean window screens on truck.

Es hora de limpiar profundamente las mosquiteras de las ventanas del camión.

### **HOT AND COLD POTABLE WATER AVAILABLE - 16 21**

"Comply by Date" Not

Not In Compliance

Specified

Violation Description:

An adequate, protected, pressurized, potable supply of hot water and cold water shall be provided at all times. (113953(c), 114099.2(b) 114101(a), 114189, 114192.1, 114195)

Corrective Description:

Inspector Comments:

Make sure truck can be able to supply a minimum temperature of 120°F for hot water.

Asegúrese de que el camión pueda suministrar una temperatura mínima de 120 °F para agua caliente.

FOOD TRAINING - 16 1 "C

"Comply by Date" Not Specified Not In Compliance

Violation Description:

**Facility Name** 

Received By:

: EL PINCHE TACO

### OFFICIAL FOOD INSPECTION REPORT

Owner



: ADRIANA VALDOVINES

Site Address : 3070 HWY 99W Owner Address : 5101 TOOMES AVE

All food employees shall have adequate knowledge of and be trained in food safety as it relates to their assigned duties. (113947) Food
facilities that prepare, handle or serve non-prepackaged potentially hazardous food, shall have an employee who has passed an approved
food safety certification examination. (113947-113947.1)

\*\*Corrective Description:\*\*

\*\*Inspector Comments:\*\*

One person on staff must have the Managers Food Handlers Certificate and all other employees must have the Basic Food Handlers Certificate.

Una persona de la plantilla debe tener el Certificado de Gerente de Manipulador de Alimentos y el resto de empleados deben tener el Certificado
Básico de Manipulador de Alimentos.

\*\*Overall Inspection Comments\*\*

Please see above on how to correct current violation(s).

\*\*Consulte más arriba sobre cómo corregir las infracciones actuales.\*\*

Amanda Young

Date

Person in Charge

Received By:

### OFFICIAL FOOD INSPECTION REPORT



Date

Facility Name : GODFATHER'S PIZZA Owner : LOVE'S TRAVEL STOPS & COUNTRY STORES,

Site Address : 2120 SOUTH AVE Owner Address : 8131 METCALF AVE 300

Facility ID : FA0001631 Inspector : EE0000005 - Tia Branton

Record ID : PR0003165 Inspector Phone : (530) 527-8020

License/Permit Number : PT0003398 Program: : 1623 - Restaurant <2000 Sq. Feet

:

Inspection Date : 11/2/2023 Total Inspection Time : 0 min.
Inspection Number : DA0011722

Inspection Number : DA0011722
Purpose of Inspection : 102 - Routine Inspection
Result : 01 - Meets Standards

Date

| Inspection Violations                     |            |
|---|------------|
| No violations cited.                      |            |
|   |            |
| Overall Inspection Comments               |            |
| Facility looks good. No violations noted. |            |
|   | J. Branton |
|   | - Dolanton |

Tia Branton

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : HEART TALK CAFE Owner : KARLA STROMAN
Site Address : 2498 S MAIN ST Owner Address : 17750 HIGHWAY 36W

Facility ID : FA0000546 Inspector : EE0000021 - Amanda Young

Record ID : PR0000160 Inspector Phone : Not Specified

License/Permit Number : 2121-16F-1 Program: : 1623 - Restaurant <2000 Sq. Feet

:

Inspection Date : 11/3/2023 Total Inspection Time : 10 min.

Inspection Number : DA0011714
Purpose of Inspection : 102 - Routine Inspection

Result : 01 - Meets Standards

## Inspection Violations No violations cited. Overall Inspection Comments Prep area is very clean and all units in temperature, thank you! Received By: Date Amanda Young Date

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : JACK'S PLACE Owner : ALEX RIVERA
Site Address : 7875 HIGHWAY 99 E Owner Address : 5075 CLARK RD

Facility ID : FA0000643 Inspector : EE0000021 - Amanda Young

Record ID : PR0000284 Inspector Phone : Not Specified

License/Permit Number : 2289-16F-1 Program: : 1623 - Restaurant <2000 Sq. Feet

Person in Charge :

Inspection Date : 11/16/2023 Total Inspection Time : 60 min.

Inspection Number : DA0011745

Purpose of Inspection : 102 - Routine Inspection Result : 03 - Minor Violations

An inspection of your property revealed the following violations. Please note the date for reinspection. Thank you for your cooperation.

### Inspection Violations

### **FACILITY SHALL BE KEPT CLEAN AT ALL TIMES - 16 44**

"Comply by Date" Not

Not In Compliance

Specified

### Violation Description:

The premises of each food facility shall be kept clean and free of litter and rubbish; all clean and soiled linen shall be properly stored; non-food items shall be stored and displayed separate from food and food-contact surfaces; the facility shall be kept vermin proof. (114067 (j), 114123, 114143 (a) & (b), 114256, 114256.1, 114256.2, 114256.4, 114257.1, 114259.1, 114259.2, 114259.3, 114279, 114281, 114282)

Corrective Description:

### Inspector Comments:

Continue to get rid of any unused equipment in the restaurant. This will help with cleaning and avoiding vectors.

FOOD TRAINING - 16 1 "Comply by Date" Not Not In Compliance

Specified

### Violation Description:

All food employees shall have adequate knowledge of and be trained in food safety as it relates to their assigned duties. (113947) Food facilities that prepare, handle or serve non-prepackaged potentially hazardous food, shall have an employee who has passed an approved food safety certification examination. (113947-113947.1)

### Corrective Description:

### Inspector Comments:

ALL employees who handle and prepare food MUST have a Food Handlers Certificate. Please have staff obtain certificate within 90 days of today's date, 11/16/2023.

### ALL FOOD SHALL BE SEPERATED AND PROTECTED FROM CONTAMINATION - 16 27

"Comply by Date" Not

Not In Compliance

Specified

### Violation Description:

All food shall be separated and protected from contamination. (113984 (a, b, c, d, f), 113986, 114060, 114067(a, d, e, j), 114069(a, b), 114077, 114089.1 (c), 114143 (c))

### Corrective Description:

### Inspector Comments:

All food containers must have a lid or covering to reduce cross contamination.

### **ADEQUATE LIGHTING REQUIRED - 16 38A**

"Comply by Date" Not

Specified

Not In Compliance

### Violation Description:

Adequate lighting shall be provided in all areas to facilitate cleaning and inspection. Light fixtures in areas where open food is stored, served, prepared, and where utensils are washed shall be of shatterproof construction or protected with light shields. (114149.2, 114149.3, 114252, 114252.1)

### Corrective Description:

### OFFICIAL FOOD INSPECTION REPORT



| Facility Name<br>Site Address  | : JACK'S PLACE<br>: 7875 HIGHWAY 99 E                       | Owner<br>Owner Address | : ALEX RIVERA<br>: 5075 CLARK RD |      |  |  |
|--|---|------------------------|----------------------------------|------|--|--|
| Inspector Comments:  Please add a light bulb cover to the light in the walk-in refrigerator. |   |                        |                                  |      |  |  |
| Please see above   | on Comments on how to correct current violation(s), thank y | rou.                   |                                  |      |  |  |
|  |   | O.O                    | i ya                             |      |  |  |
| Received By:   | ı   | Date Amanda Young      |                                  | Date |  |  |

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : LARIAT BOWL Owner : DANIEL NEHER
Site Address : 365 S MAIN ST Owner Address : 365 S MAIN ST

Facility ID : FA0000570 Inspector : EE0000021 - Amanda Young

Record ID : PR0000186 Inspector Phone : Not Specified

License/Permit Number : 2156-16F-1 Program: : 1624 - Restaurant 2000 Sq.

: Feet-6000 Sq. Feet

Inspection Number : DA0011735
Purpose of Inspection : 102 - Routine Inspection

Result : 01 - Meets Standards

| <u> </u>   |      |              |      |
|--|------|--------------|------|
| Inspection Violations                                  |      |              |      |
| No violations cited.                                   |      |              |      |
|  |      |              |      |
| Overall Inspection Comments                            |      |              |      |
| Facility looks great and all units in temp, thank you. |      |              |      |
|  |      | ade you      |      |
|  |      |              |      |
| Received By:   | Date | Amanda Young | Date |

Person in Charge

Received By:

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : LASSEN STEAK HOUSE : WESLEY SALISBURY Owner

Site Address : 4945 HIGHWAY 99 E : 4945 HWY 99E Owner Address

: EE0000021 - Amanda Young FA0000572 Facility ID Inspector

PR0000189 · Not Specified Record ID Inspector Phone

: 2159-16F-1 : 1623 - Restaurant <2000 Sq. Feet License/Permit Number Program:

: 60 min. Inspection Date : 11/17/2023 Total Inspection Time

: DA0011756 Inspection Number : 01 - Meets Standards Result 102 - Routine Inspection Purpose of Inspection

Date

### Inspection Violations No violations cited. Overall Inspection Comments Facility is well organized and very clean, keep it up! Thank you. Amanda Young

### **OFFICIAL FOOD INSPECTION REPORT**



| Facility Name<br>Site Address  | : LITTLE CAESARS PIZZA<br>: 965 HWY 99W 135  | Owner<br>Owner Address   | : BHUPINDER SINGH & KAMALDEEP SINGH<br>: 1646 REDHAVEN AVE  |  |  |
|--|--|--|---|--|--|
| Facility ID Record ID License/Permit Number Person in Charge Inspection Date Inspection Number Purpose of Inspection   | : FA0001159<br>: PR0001990<br>: 8534-16F-1<br>:<br>: 11/15/2023<br>: DA0011740<br>: 102 - Routine Inspection | Inspector Inspector Phone Program:  Total Inspection Time Result | : EE0000005 - Tia Branton<br>: (530) 527-8020<br>: 1623 - Restaurant <2000 Sq. Feet<br>:<br>: 60 min. |  |  |
| · · · · · · · · · · · · · · · · · · ·  | ection of your property revealed the following violations. Pl  | lease note the date for reinspect                                | ion. Thank you for your cooperation.  |  |  |
| HAND WASHING FACILITIES REQUIRED - 16 6 "Comply by Date" Not Not In Compliance Specified   |  |  |   |  |  |
| Violation Description:  Handwashing soap and towels or drying device shall be provided in dispensers; dispensers shall be maintained in good repair. (113953.2)  Adequate facilities shall be provided for hand washing, food preparation and the washing of utensils and equipment. (113953, 113953.1, 114067(f)) |  |  |   |  |  |
| Corrective Description:  Inspector Comments:  ALL handwashing sinks shall have both hot and cold running water that can reach a minimum of 100" F.   |  |  |   |  |  |
| ─Overall Inspection Co   | omments  | /). P  | aanton  |  |  |

Tia Branton

Received By:

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



| Facility | Name | : LOS AMIGOS LICENSE #2E15446 | Owner | : LOS AMIGOS LICENSE #2E15446 |
|----------|------|-------------------------------|-------|-------------------------------|
|----------|------|-------------------------------|-------|-------------------------------|

Site Address : 212 S MAIN Owner Address : 57 ELLEN LN

: EE0000021 - Amanda Young : FA0000529 Facility ID Inspector

: PR0000137 : Not Specified Record ID Inspector Phone

License/Permit Number : 2079-16F-1 : 1628 - Food Vehicle Prepared Food Program:

Inspection Date : 11/13/2023 Total Inspection Time : 30 min. : DA0011737

Inspection Number : 01 - Meets Standards Result : 102 - Routine Inspection Purpose of Inspection

| T dipose of inoposition .                                  | <u>'</u> |              |      |
|--|----------|--------------|------|
| Inspection Violations                                      |          |              |      |
| No violations cited.                                       |          |              |      |
|  |          |              |      |
| Overall Inspection Comments  All units in temp, thank you. |          |              |      |
| 1,   |          |              |      |
|  |          | ad y         |      |
| Received By:   | Date     | Amanda Young | Date |

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : LOS MONTES Owner : HILDA LOPEZ LOPEZ Site Address : SIXTH & SOLANO ST Owner Address : 4795 HOUGHTON AVE

Facility ID : FA0000509 Inspector : EE0000005 - Tia Branton

Record ID : PR0000115 Inspector Phone : (530) 527-8020

License/Permit Number : 2040-16F-1 Program: : 1628 - Food Vehicle Prepared Food

:

Inspection Date : 11/15/2023 Total Inspection Time : 60 min.

Inspection Number : DA0011739

Inspection Number : DA0011739

Purpose of Inspection : 102 - Routine Inspection

Result : 01 - Meets Standards

## Inspection Violations No violations cited. Overall Inspection Comments Mobile looks very good. Thank you. Received By: Date Tia Branton Date

### **OFFICIAL FOOD INSPECTION REPORT**



Date

| Facility Name<br>Site Address  | : LOVE'S TRAVEL STOP & COUNTRY STORES, INC<br>· 2120 SOUTH Ave  | Owner<br>Owner Address   | : LOVE'S TRAVEL STOP & COUNTRY STORES, II: 8131 METCALF AVE 300  |
|--|---|--|--|
| Facility ID Record ID License/Permit Number Person in Charge Inspection Date Inspection Number Purpose of Inspection | : FA0000993<br>: PR0001299<br>: 7077-16F-1<br>:<br>: 11/2/2023<br>: DA0011723<br>: 102 - Routine Inspection   | Inspector Inspector Phone Program:  Total Inspection Time Result | : EE0000005 - Tia Branton<br>: (530) 527-8020<br>: 1617 - Retail Market <6000 Sq Feet<br>: 1 Prep Area<br>: 60 min.<br>: 03 - Minor Violations |
| An inspe   | ction of your property revealed the following violations. Ple   | ease note the date for reinspe                                   | ction. Thank you for your cooperation.   |
| <ul> <li>Inspection Violation</li> </ul>   | ns  |  |  |
| FOOD TRAINING - 16   | 1   |  | "Comply by Date" Not Not In Compliance Specified   |
| Violation Description  | n:  |  |  |
| facilities that prep   | es shall have adequate knowledge of and be trained in foo<br>pare, handle or serve non-prepackaged potentially hazardo<br>cation examination. (113947-113947.1) | •  | ,  |
| ,  |   |  |  |
| Inspector Comment  | s: must have proof of training on site.   |  |  |
| All lood Halldlers   | must have proof of training of site.  |  |  |
| Overall Inspection Co. Please make sure snee:  | <b>mments</b><br>ze guard around all hot dog warming trays on installed corr  | rectly   |  |
|  | and the second and the dog framming hard of the second of the   |  | 3 ranton   |

Tia Branton

Date

Received By:

### **OFFICIAL FOOD INSPECTION REPORT**



| Facility Name  | : MARTITAS MEXICAN FOOD  | Owner  | : MARTHA VALDOVINO   | S         |  |
|--|--|--|--|-----------|--|
| Site Address   | : 8051 HWY 99E   | Owner Address  | : 7780 TINA CT   |           |  |
| Facility ID Record ID License/Permit Number Person in Charge Inspection Date Inspection Number Purpose of Inspection                             | : FA0000593<br>: PR0000213<br>: 2196-16F-1<br>:<br>: 11/16/2023<br>: DA0011742<br>: 102 - Routine Inspection | Inspector Inspector Phone Program:  Total Inspection Time Result | : EE0000021 - Amanda Y : Not Specified : 1623 - Restaurant <20 : : 60 min. : 03 - Minor Violations | · ·       |  |
| An inspe   | ction of your property revealed the following violations. Ple  | ease note the date for reinsp                                    | pection. Thank you for your coo  | peration. |  |
| Inspection Violation   | ons —  |  |  |           |  |
| POTENTIALLY HAZARDOUS FOODS HOLD TEMPERATURES - 16 7 "Comply by Date" Not In Compliance Specified  |  |  |  |           |  |
| Violation Description  |  |  |  |           |  |
| Potentially hazar  | dous foods shall be held at or below 41/ 45øF or at or abov  | ve 135øF. (113996, 113998  | , 114037, 114343(a))   |           |  |
| Corrective Descripti   | on:  |  |  |           |  |
| Inspector Comments:  Prep refrigerator was temped at 52° F. All units must be able to hold at/below 41° F. Please repair or replace immediately. |  |  |  |           |  |
| Overall Inspection Comments  Please see above on how to correct current violation, thank you.  |  |  |  |           |  |
| Please see above on no   | w to correct current violation, thank you.   |  |  |           |  |
| Facility well maintained, keep it up!  |  |  |  |           |  |
|  |  | ade  | you  |           |  |

Amanda Young

Date

Received By:

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : MCDONALD'S #10722 Owner : RODCO REDDING LP Site Address : 3375 SUNRISE WAY : 950 MASON ST #292 Owner Address

: EE0000005 - Tia Branton : FA0000590 Facility ID Inspector

: PR0000210 : (530) 527-8020 Record ID Inspector Phone

License/Permit Number : 2192-16F-1 : 1623 - Restaurant <2000 Sq. Feet Program:

: 11/2/2023 Inspection Date Total Inspection Time : 60 min. : DA0011707

Inspection Number : 01 - Meets Standards Result : 102 - Routine Inspection Purpose of Inspection

Person in Charge

| Inspection Violations   |   |                                      |                        |
|---|---|--------------------------------------|------------------------|
| No violations cited.  |   |                                      |                        |
| <b>Overall Inspection Comments</b> Facility looks good. Thank you. Plea | se make sure that hand washing sink has | water at or above 100' F for EACH PE | ERSON WHO WASHES THEIR |
| HANDS!. Holding the water on for 20                                     | minutes before receiving hot water does | not count.                           |                        |
|   |   | 2. B                                 | Ranton                 |
| Received By:  | Date                                    | Tia Branton                          | Date                   |

Facility Name

Received By:

: MELISSA'S MEXICAN FOOD

### **OFFICIAL FOOD INSPECTION REPORT**

Owner



Date

: JOSE M FELIX AISPURO

| Site Address  | : 592 ANTELOPE BLVD                                       | Owner Address                  | : 707 BEECH WAY AV                | E                 |
|---|---|--------------------------------|-----------------------------------|-------------------|
| Facility ID   | : FA0001628   | Inspector                      | : EE0000021 - Amanda              | Young             |
| Record ID   | : PR0003157   | Inspector Phone                | : Not Specified                   |                   |
| License/Permit Number                               | : PT0003390   | Program:                       | : 1628 - Food Vehicle             | Prepared Food     |
| Person in Charge                                    | :   |                                | ;                                 |                   |
| Inspection Date                                     | : 11/8/2023   | Total Inspection Time          | ; 30 min.                         |                   |
| Inspection Number                                   | : DA0011726   | Result                         | · 03 - Minor Violations           |                   |
| Purpose of Inspection                               | : 102 - Routine Inspection                                | Result                         | . 00 - WIIIIOI VIOIALIONS         |                   |
| ·   | ction of your property revealed the following violations. | Please note the date for reins | spection. Thank you for your co   | ooperation.       |
| <ul> <li>Inspection Violation</li> </ul>            | ons —   |                                |                                   |                   |
| ALL NONFOOD CON                                     | TACT SURFACES SHALL BE KEPT CLEAN - 16 33                 |                                | "Comply by Date" Not<br>Specified | Not In Compliance |
| Violation Descriptio                                | n:  |                                |                                   |                   |
| All nonfood cont                                    | act surfaces of utensils and equipment shall be clean. (1 | 14115 (c))                     |                                   |                   |
| Corrective Descript                                 | ion:  |                                |                                   |                   |
| Inspector Comment                                   | 's:   |                                |                                   |                   |
| Time to deep cle                                    | an window screens and all parts of the hood system.       |                                |                                   |                   |
| <b>Overall Inspection Co</b> Please see above on he | omments ow to correct current violation, thank you.       |                                |                                   |                   |
|   |   |                                |                                   |                   |

Amanda Young

Date

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : OLIVE PIT Owner : OLIVE PIT
Site Address : 2156 SOLANO ST Owner Address : 2156 SOLA ST

Facility ID : FA0000600 Inspector : EE0000005 - Tia Branton

Record ID : PR0000222 Inspector Phone : (530) 527-8020

License/Permit Number : 2213-16F-1 Program: : 1623 - Restaurant <2000 Sq. Feet

:

Inspection Date : 11/2/2023 Total Inspection Time : 60 min.

Inspection Number : DA0011711

Purpose of Inspection : 102 - Routine Inspection Result : 01 - Meets Standards

| Inspection Violations                |      |             |      |
|--------------------------------------|------|-------------|------|
| •                                    |      |             |      |
| No violations cited.                 |      |             |      |
|                                      |      |             |      |
|                                      |      |             |      |
| Overall Inspection Comments          |      |             |      |
| Facility looks very good. Thank you! |      |             |      |
|                                      |      | J. Baa      | 1    |
|                                      |      | ~ . I ? Ra  | nton |
|                                      |      | <del></del> | Data |
| Received By:                         | Date | Tia Branton | Date |

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : PUMPKINLAND Owner : PUMPKINLAND
Site Address : 12000 HIGHWAY 99 E Owner Address : 12000 HIGHWAY 99

Facility ID : FA0000805 Inspector : EE0000021 - Amanda Young
Record ID : PR0000588 Inspector Phone : Not Specified

License/Permit Number : 5153-16F-1 Program: : 1614 - Retail Market<6000 Sq. Feet

: No Prep

Inspection Date : 11/16/2023 Total Inspection Time : 45 min.

Inspection Number : DA0011741
Purpose of Inspection : 102 - Routine Inspection
Result : 01 - Meets Standards

Inspection Violations
No violations cited.

Overall Inspection Comments
Facility is very clean and well maintained, thank you!

Received By:

Date

Amanda Young

Date

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : RALEY'S 233 Owner : THOMAS P RALEY
Site Address : 725 S MAIN ST Owner Address : P O BOX 15618

Facility ID : FA0000616 Inspector : EE0000021 - Amanda Young

Record ID : PR0000246 Inspector Phone : Not Specified

License/Permit Number : 2241-16F-1 Program: : 1622 - Retail Market >15K Sq Feet 3

: Prep

Inspection Date : 11/3/2023 Total Inspection Time : 60 min.
Inspection Number : DA0011713

Inspection Number : DA0011713

Purpose of Inspection : 102 - Routine Inspection

Result : 01 - Meets Standards

| Inspection Violations  No violations cited.   |      |              |      |
|---|------|--------------|------|
| —Overall Inspection Comments Facility is clean and all units in temperature. Thank yo | u!   |              |      |
|   |      | ade you      |      |
| Received By:  | Date | Amanda Young | Date |

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : RANCHO GRANDE Owner : JOSE FIGUEROA SANCHEZ

Site Address : 1995 SOLANO ST Owner Address : 1995 SOLANO ST

Facility ID : FA0000617 Inspector : EE0000005 - Tia Branton

Record ID : PR0000247 Inspector Phone : (530) 527-8020

License/Permit Number : 2242-16F-1 Program: : 1623 - Restaurant <2000 Sq. Feet

:

Inspection Date : 11/6/2023 Total Inspection Time : 60 min.
Inspection Number : DA0011720

Inspection Number : DA0011720
Purpose of Inspection : 102 - Routine Inspection
Result : 01 - Meets Standards

| Inspection Violations  |          |             |      |
|--|----------|-------------|------|
| No violations cited.   |          |             |      |
| <b>—Overall Inspection Comments</b> Facility looks amazing. Thank you ve | ry much! |             |      |
|  |          | J. Baa      | nton |
| Received By:   | Date     | Tia Branton | Date |

Person in Charge

Received By:

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : STARBUCKS COFFEE #6639 : JEFF FARRER Owner

Site Address : 1058 S MAIN ST : 2550 LAKECREST DR Owner Address

FA0000641 : EE0000021 - Amanda Young Facility ID Inspector

PR0000282 · Not Specified Record ID Inspector Phone

: 2286-16F-1 : 1623 - Restaurant <2000 Sq. Feet License/Permit Number Program:

: 45 min. Inspection Date : 11/3/2023 Total Inspection Time : DA0011715

Inspection Number : 01 - Meets Standards Result 102 - Routine Inspection Purpose of Inspection

Date

### Inspection Violations No violations cited. Overall Inspection Comments Facility looks great and all units in temperature, thank you! Staff were very helpful today, thank you. Amanda Young

Person in Charge

Received By:

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : STARBUCKS COFFEE COMPANY #24030 Owner : STARBUCKS COFFEE COMPANY #24030

Site Address : 265 ANTELOPE BLVD Owner Address : 2401 S UTAH AVE SSDIO

Facility ID : FA0001293 Inspector : EE0000021 - Amanda Young

Record ID : PR0002273 Inspector Phone : Not Specified

License/Permit Number : PT0002364 Program: : 1623 - Restaurant <2000 Sq. Feet

:

Inspection Date : 11/13/2023 Total Inspection Time : 45 min.

Inspection Number : DA0011733

Inspection Number : DA0011733

Purpose of Inspection : 102 - Routine Inspection

Result : 01 - Meets Standards

Date

# Inspection Violations No violations cited. Overall Inspection Comments Store is very clean and all units in temp! Thank you. Staff were very helpful today, thank you. Output Outp

Amanda Young

Person in Charge

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : SWEET THANGS Owner : KELLI HENDRYK Site Address : 14585 CARRIAGE LN : 14585 CARRIAGE LN Owner Address

: EE0000021 - Amanda Young : FA0001433 Facility ID Inspector

: PR0002546 Record ID Inspector Phone : Not Specified License/Permit Number : PT0002755

: 1655 - Cottage Food Class B Program:

: Indirect Sale/Inspection

Inspection Date : 11/27/2023 Total Inspection Time : 30 min. : DA0011755 Inspection Number

: 01 - Meets Standards Result : 102 - Routine Inspection Purpose of Inspection

| Inspection Violations  No violations cited.                                     |      |              |      |
|---|------|--------------|------|
| Overall Inspection Comments  Refrigerator in temp and kitchen clean, thank you! |      |              |      |
|   |      | ade you      |      |
| Received By:  | Date | Amanda Young | Date |

### **OFFICIAL FOOD INSPECTION REPORT**



Date

| Facility Name                         | · THAI HOUSE   | Owner   | : KIRATHI TANATCHA                   | ΙΩ                   |
|---------------------------------------|--|---|--------------------------------------|----------------------|
| Facility Name Site Address            | · 248 S MAIN ST  | Owner Address                                   | : 18809 GERKIN AVE                   | IOAI                 |
| Oile Address                          | . 2.00   | Owner Address                                   | 10009 GERMIN AVE                     |                      |
| Facility ID                           | : FA0000508  | Inspector                                       | : EE0000021 - Amanda                 | a Young              |
| Record ID                             | : PR0000114  | Inspector Phone                                 | : Not Specified                      |                      |
| License/Permit Number                 | : 2039-16F-1   | Program:  | : 1623 - Restaurant <                | 2000 Sq. Feet        |
| Person in Charge                      | :  |   | :                                    |                      |
| Inspection Date                       | : 11/13/2023   | Total Inspection Time                           | : 60 min.                            |                      |
| Inspection Number                     | : DA0011736  |   | O2 Minan Vialations                  |                      |
| Purpose of Inspection                 | : 102 - Routine Inspection   | Result  | : 03 - Minor Violations              |                      |
| An inspe                              | ection of your property revealed the following   | violations. Please note the date for rein       | spection. Thank you for your co      | ooperation.          |
| ALL VENTILATION S                     | HALL MEET REQUIREMENTS - 16 38B  |   | "Comply by Date" Not<br>Specified    | Not In Compliance    |
| Violation Descriptio                  | n:   |   |                                      |                      |
| Canopy-type hoo<br>Toilet rooms sha   | shall be provided to remove toxic gases, heat<br>ods shall extend 6# beyond all cooking equip<br>all be vented to the outside air by a screened<br>g codes. (114149, 114149.1) | ment. All areas shall have sufficient vent      | tilation to facilitate proper food s | storage.             |
| Corrective Descript                   | ion:   |   |                                      |                      |
| Inspector Comment<br>Time to deep cle | ts:<br>ean the ANSUL system including the hoses a  | nd in between.                                  |                                      |                      |
| ALL FOOD SHALL E                      | BE SEPERATED AND PROTECTED FROM C  | CONTAMINATION - 16 27                           | "Comply by Date" Not                 | Not In Compliance    |
|                                       |  |   | Specified                            |                      |
| Violation Descriptio                  | n:   |   |                                      |                      |
|                                       | separated and protected from contamination .1 (c), 114143 (c))   | . (113984 (a, b, c, d, f), 113986, 114060       | ), 114067(a, d, e, j), 114069(a,     | b),                  |
| Corrective Descript                   | ion:   |   |                                      |                      |
| Inspector Comment                     | ts:  |   |                                      |                      |
| All food stuff cor                    | tainers must have a lid or covering.   |   |                                      |                      |
| POTENTIALLY HAZA                      | RDOUS FOODS HOLD TEMPERATURES -  | 16 7  | "Comply by Date" Not<br>Specified    | Not In Compliance    |
| Violation Descriptio                  | n:   |   |                                      |                      |
| Potentially hazar                     | rdous foods shall be held at or below 41/ 45ø  | F or at or above 135øF. (113996, 11399          | 98, 114037, 114343(a))               |                      |
| Corrective Descript                   | ion:   |   |                                      |                      |
| Inspector Comment                     |  | MUOTI COLLA LA | Di                                   |                      |
| Frep mage by A                        | NSUL system was temped at 50°F. This fridg   | ge MIOOT be able to floid at/below 41 F.        | г ісазе гераіі от геріасе ігптец     | iai <del>c</del> iy. |
| Overall Inspection Co                 |  |   |                                      |                      |
| riease see above on hi                | ow to correct current violation(s). Thank you.   |   |                                      |                      |
|                                       |  | al  | Jul 1                                |                      |

Amanda Young

Date

Received By:

Person in Charge

Received By:

### OFFICIAL FOOD INSPECTION REPORT



Facility Name : WEST APPAREL & EMBROIDERY Owner : TONI WEST

Site Address : 629 MAIN ST Owner Address : 3845 VIA VENTURA

Facility ID : FA0001695 Inspector : EE0000021 - Amanda Young

Record ID : PR0003303 Inspector Phone : Not Specified

License/Permit Number : PT0003540 Program: : 1623 - Restaurant <2000 Sq. Feet

:

Inspection Date : 11/1/2023 Total Inspection Time : 45 min.
Inspection Number : DA0011705

Inspection Number : DA0011705
Purpose of Inspection : 106 - Pre-Opening Inspection
Result : 01 - Meets Standards

Date

| Inspection Violations  |         |
|--|---------|
| No violations cited.   |         |
|  |         |
| Overall Inspection Comments  |         |
| Gelato area looks great, clear to open! Best of luck on the endeavors!               |         |
| Please obtain bleach and chlorine test strips for three compartment sink, thank you. |         |
|  | ade for |

Amanda Young

### **OFFICIAL FOOD INSPECTION REPORT**



Date

| Facility Name  | : WOODSON BRIDGE MINI MART/DELI   | Owner   | : SEMRANJIT KAUR   |                   |
|--|---|---|--|-------------------|
| Site Address   | : 3770 ILLINOIS AVE   | Owner Address   | : 3770 ILLINOIS AVE  |                   |
| Facility ID Record ID License/Permit Number Person in Charge Inspection Date Inspection Number Purpose of Inspection | : FA0000666<br>: PR0000316<br>: 2332-16F-1<br>:<br>: 11/21/2023<br>: DA0011754<br>: 102 - Routine Inspection        | Inspector Inspector Phone Program: Total Inspection Time Result | <ul> <li>EE0000005 - Tia Branton</li> <li>(530) 527-8020</li> <li>1617 - Retail Market &lt;6000 Sq Feet</li> <li>1 Prep Area</li> <li>60 min.</li> <li>05 - Reinspection Required</li> </ul> |                   |
| An inspe   | ection of your property revealed the following violations.  | . Please note the date for reins                                | spection. Thank you for your co  | operation.        |
| <ul> <li>Inspection Violation</li> </ul>   | one ———   |   |  |                   |
| mopeonon violan  | 313   |   |  |                   |
| HAND WASHING FA  | CILITIES REQUIRED - 16 6  |   | "Comply by Date" Not<br>Specified  | Not In Compliance |
| Violation Description  | n:  |   |  |                   |
| •  | oap and towels or drying device shall be provided in dis<br>es shall be provided for hand washing, food preparation | •   | • • •  | ,                 |
| Corrective Descript  | ion:  |   |  |                   |
| Inspector Comment A handwashing  | ts:<br>station shall be installed in food prep area.  |   |  |                   |
| ALL NONFOOD CON  | TACT SURFACES SHALL BE KEPT CLEAN - 16 33   |   | "Comply by Date" Not<br>Specified  | Not In Compliance |
| Violation Description  | n:  |   |  |                   |
| All nonfood conta  | act surfaces of utensils and equipment shall be clean. (  | (114115 (c))  |  |                   |
| Corrective Descript  | ion:  |   |  |                   |
|  | g around deep fryer need to be reaplaced with non-pol   | rous easily cleanable product.                                  |  |                   |
| Overall Inspection Co  | nmments and contact this office when ready for a reinspection.  |   |  |                   |
|  |   |   | Branton  |                   |

Tia Branton

Date

Received By: