



Food Program Official Inspection Report
 SISKIYOU COUNTY PUBLIC HEALTH
 & COMMUNITY DEVELOPMENT
 806 S. Main Street
 Yreka, California 96097
 ph: (530) 841-2100, fax: (530) 841-4076

Facility Name: Yaks Mount Shasta Koffee and Eatery CMHC# 616875
 Address: 333 N. Mt. Shasta Blvd, Mount Shasta, CA 96067
 Permit Holder: Alyssa Williams Permit To Operate: Valid Not Valid
 Phone: 530-918-5569 E-mail: _____
 Food Safety Certified Employee: Courtney Chase Expiration Date: 6/2024

| | | MAJ | OUT | COS | The marked items represent Health Code violations and must be corrected as follows: |
|------------------------|----------------------|-----|-----|-----|--|
| Protection Time/ Temp. | 1 Food Temp. | | | | Routine Inspection Conducted This Date. |
| | 2 Prep./ Service | | | | |
| | 3 Storage/ Disp. | | | | |
| | 4 Frozen Food | | | | |
| | 5 Pure Food | | | | |
| | 6 Reused Food | | | | |
| | 7 Transportation | | | | |
| Food Storage | 8 Storage Fac. | | | | 12.) Observed handwashing sink full of dirty blenders and blocked from use. Hand washing sinks may only be used for hand washing and be accessible at all times. |
| | 9 Refrig. Units | | | | |
| | 10 Thermometer | | | | |
| | 11 Hazardous Mat. | | | | |
| | 12 Spoils | | | | |
| Uten./ Equip. | 13 Wash/ Sanitize | | | | Corrected during inspection. 3 rd Notice |
| | 14 Equip. Condition | | | | |
| | 15 Utensil Condition | | | | |
| | 16 Storage | | | | |
| Employee | 17 Handwashing | | X | X | 25.) Observed excessive number of flies in the facility. Keep facility free of all vermin and insects. 2 nd Notice. |
| | 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 | | X | | |
| | 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): Alyssa Williams Received by (Signature): _____ Date: 8-5-20
 REHS (Print): Rick Florendo REHS (Signature): _____ Phone: 841-2114