

Food Program Official Inspection Report

SISKIYOU COUNTY

COMMUNITY DEVELOPMENT DEPARTMENT

Environmental Health Division 806 S. Main Street

Yreka, California 96097

ph: (530) 841-2100, fax: (530) 841-4076

Facilit	y N	ame: Tar	0	5		TAO	Tru	1cK			СМНС#	
Facility Name: Tacos TAO Truck Address: 108 W. OBELIN Rd. YreKg, CA 96097 Permit Holder: Permit To Operate:												
Permit Holder: Samantha Perez Permit To Operate: Valid Not Valid Phone: 408-680-6425 E-mail:												
Phone: 408-680-642 E-mail:												
Food Safety Certified Employee: Expiration Date:												
MAJ OUT COS The marked items represent Health Code violations and must be corrected as follows:												
Food Storage Protection Time/ Temp.	1	Food Temp.			-							
	2	Prep./ Service				ROO	itive	165	Dection	U CO	<i>Nducted</i>	10
	3	Storage/ Disp.				1		, /	***************************************			
	4	Frozen Food				Thic	da	to.				
	5	Pure Food										
	6	Reused Food	201									
	7	Transportation					- 1	_		1 1	,	
	8	Storage Fac.				All F	50d 7	emas	are Sa	txta	ctory	
	9	Refrig. Units				,		, .	-			
	10	Thermometer				at on	SON	+ Tim	e e		Waster Vision	
	11	Hazardous Mat.				,						
	12	Spoils										
Uten./Equip.	13	Wash/ Sanitize			V - 59752	-)		b 2 6	0 -	, .		
	14	Equip. Condition				201 M	WI	oroula	e 1000	Mai	rggers	
	15	Utensil Condition					1	,			,	
	16	Storage				revin	Cat	1000				
Employee	17	Handwashing				00.7.						
	18	Employee Hygiene	1									
	19	Employee Habits										
	20	Food Cert./ Card		\succeq								
Water	21	Water										
	22	Cross Con.										
Waste	23	Liquid Waste										
	24	Refuse		٠.								
Vermir	25	Rodents/ Insects										
	26	Animal/ Fowl										
Misc. Facilities	_	Ventilation										
	28	Doors									10.000	
	29	Floors										
	30	Walls - Ceilings										
	31	Toilet Fac.										
	32	Janitorial Fac.										
	33	Lighting										
	34	Clothing - Linen										
	35	Signs										
	_	Misc.									16.75	
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site Received By (Printle). Date: / /												
SAMANTHA PEREZ RECEIVED BY (SIGNALUTE): 200000 12/8/21												
REHS (Print): David Jackson REHS (Signature): Phone: 330-841-2114												2114