

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: CASA RAMOS CMHC# 60188							CMHC# 601882	
Addre						D. YREKA, CA 96097		
Permit	Но	lder:			•	~	Permit To Operate:	
MARCO RAMOS □Not Valid								
Phone	:	842-7172	2			E-mail:		
						JORGE OROZCO	Expiration Date: $4/2027$	
			MAJ	OUT	cos		7/2021	
Protection Time/ Temp.	1	Food Temp.						
	2	Prep./ Service				ROUTINE INSPECTION CONDUC	TED ON THIS DATE.	
	3	Storage/ Disp.						
	4	Frozen Food						
	5	Pure Food						
	6	Reused Food						
	7	Transportation						
Food Storage	8	Storage Fac.						
	9	Refrig. Units		Х				
	10	Thermometer				OBSERVED 2 REFRIGERATION UNITS NOT PROPERLY COOLING AT 48F.		
	11	Hazardous Mat.				THESE 2 UNITS SHALL MAINTAIN A TEMP OF AT LEAST 41F. FACILITY IS		
	12	Spoils						
Uten./Equip.	13	Wash/ Sanitize				INSTRUCTED TO REPAIR/REPLACE THE UNIT	`S ALL EQUIPMENT	
	14	Equip. Condition				THE THE CHILD IN THE CHILD THE CHILD	o. Tied Equit MENT	
	15	Utensil Condition				SHALL BE IN GOOD REPAIR. A FOLLOW-UP W	VILL BE CONDUCTED WITHIN 7	
	16	Storage						
Employee	17	Handwashing				DAYS.		
	18	Employee Hygiene						
	19	Employee Habits						
	20	Food Cert./ Card						
Water	21	Water						
	22	Cross Con.						
Waste	23	Liquid Waste						
	24	Refuse						
Vermir	25	Rodents/ Insects						
Ve	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						
		Misc.						
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site Received By (Print): Received by (Signature): Date:								
receive	CARLOS RENDON Received by (Signature): 8/2/2022							
REHS (REHS (Print): REHS (Signature): Phone: Phone: 9.41 0110							
	ZAKIYA RAHH 841-2112							