

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: BLACK BEAR DINER CMHC# 100367 | | | | | | |
|--|----|-------------------|---------|---------|--|-------------------------------------|
| Addre | | | AIN | STRE | ET YREKA, CA 96097 | |
| Permit Holder: TYLER CARMICHAEL AND BOB MANLEY | | | | | | Permit To Operate: ☑ □ Not Valid |
| Phone | : | | | | E-mail: | |
| | | | | | | Expiration Date: |
| | | | MAJ | OUT COS | SAMANTHA MOWATT | 3/2024 |
| Protection Time/ Temp. | 1 | Food Temp. | | | | |
| | 2 | Prep./ Service | | | ROUTINE INSPECTION CONDU | CTED 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 | | | | |
| | 10 | Thermometer | | | | |
| | 11 | Hazardous Mat. | | | | |
| | 12 | Spoils | | | | |
| Uten./Equip. | 13 | Wash/ Sanitize | | | | |
| | 14 | Equip. Condition | X | | 1,14. OBSERVED MEAT STORED IN D | DRAWER REFRIGERATION AT |
| | 15 | Utensil Condition | | | | |
| | 16 | Storage | | | 45F. THIS UNIT MUST MAINTAIN A TI | EMP AT OR BELOW 41F. |
| Employee | 17 | Handwashing | | | | |
| | 18 | Employee Hygiene | 9 | | FACILITY IS INSTRUCTED TO REPAIR | OR REPLACE THIS UNIT TO |
| | 19 | Employee Habits | | | | |
| | 20 | Food Cert./ Card | | | COMPLY WITH 'ALL EQUIPMENT SHA | LL BE IN GOOD REPAIR'. |
| Water | 21 | Water | | | | |
| | 22 | Cross Con. | | | | |
| Waste | 23 | Liquid Waste | | | | |
| | 24 | Refuse | | | | |
| Vermin | | Rodents/ Insects | | | | |
| | 26 | Animal/ Fowl | | | | |
| Misc. Facilities | 27 | Ventilation | | | | |
| | 28 | Doors | | | | |
| | | Floors | | X | | |
| | 30 | Walls - Ceilings | | | | |
| | 31 | Toilet Fac. | | | 29. Facility is instructed to address th | e floors in walls in |
| | 32 | Janitorial Fac. | | | 25. Facility is mistructed to address th | ic moors in wark-in |
| | 33 | Lighting | | | | |
| | | Clothing - Linen | | | refrigerator near kitchen. | |
| | 35 | Signs | | | | |
| | | Misc. | or i.e. |) - f : | Slience COS = Compost d - 11 - 11 | |
| MAJ = Major violation OUT = Out of compliance COS = Corrected on-site Received By (Print): DAM OLONDO Date: 8/10/2022 | | | | | | |
| PAM GLOVER 9710/2022 | | | | | | |
| REHS (Print): ZAKIYA RAHH REHS (Signature): Phone: 841-2112 | | | | | | |