



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

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|--|---|
| Facility Name: MACGREGOR'S BOOK NOOK | CMHC# |
| Address: 202 W Main St Yreka, CA 96097 | |
| Permit Holder: Mary Jane Gibbons | Permit To Operate: <input type="checkbox"/> Valid <input type="checkbox"/> Not Valid |
| Phone: 530-841-2664 | E-mail: |
| Food Safety Certified Employee: Mary Jane Gibbons | Expiration Date: 10/24 |

| | | MAJ | OUT | COS | |
|---|----|-------------------|-----|-----|--|
| The marked items represent Health Code violations and must be corrected as follows: | | | | | |
| Protection Time/ Temp. | 1 | Food Temp. | | | |
| | 2 | Prep./ Service | | | |
| | 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 | | | |
| | 15 | Utensil Condition | | | |
| Employee | 16 | Storage | | | |
| | 17 | Handwashing | | | |
| | 18 | Employee Hygiene | | | |
| | 19 | Employee Habits | | | |
| Water | 20 | Food Cert./ Card | | | |
| | 21 | Water | | | |
| Waste | 22 | Cross Con. | | | |
| | 23 | Liquid Waste | | | |
| Vermir | 24 | Refuse | | | |
| | 25 | Rodents/ Insects | | | |
| Facilities | 26 | Animal/ Fowl | | | |
| | 27 | Ventilation | | | |
| | 28 | Doors | | | |
| | 29 | Floors | | | |
| | 30 | Walls Ceilings | | | |
| | 31 | Toilet Fac. | | | |
| | 32 | Janitorial Fac. | | | |
| Misc. | 33 | Lighting | | | |
| | 34 | Clothing - Linen | | | |
| | 35 | Signs | | | |
| | 36 | Misc. | | | |

Routine Inspection Conducted On This Date

Obtain valid operating permit within the next 7 days or ASAP. License was last renewed in 2021.

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|---|--|
| MAJ = Major violation OUT = Out of compliance COS = Corrected on-site | |
| Received By (Print): Mary Jane Gibbons | Received by (Signature): <i>Mary Jane Gibbons</i> |
| REHS (Print): Alexa Roche | REHS (Signature): <i>Alexa Roche</i> |
| Date: 3/16/23 | Phone: 530-841-2117 |