

## **Food Program Official Inspection Report**

Siskiyou County Community Development Department Environmental Health Division 806 S. Main Street Yreka, California 96097

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

Facility	/ Na	me: El Tio Chu	uy R	esta	uran	Permit #				
Addres	ss:	PO Box 389 D								
Permit Holder: Permit To Operate:										
Elizabeth Ruvalcaba O Valid O Not V										
Phone	:	530-397-3067				E-mail:				
Food S	Food Safety Certified Employee: Expiration Date:									
			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				ROUTINE INSPECTION CONDUCTED THIS DATE				
	3	Storage/ Disp.								
	4	Frozen Food				16) Observed HOUSEHOLD USE ONLY equipment being used to heat refried beans.				
	5	Pure Food				Cooking equipment need to be NSF/ANSI approved. All unapproved cooking equipment				
	6	Reused Food				will need to be removed from the facility.				
Ā	7	Transportation				•				
	8	Storage Fac.								
rage	9	Refrig. Units								
Sto	10	Thermometer				NOTE: WEED CUIDDENT FACILITY DEDMIT AND FOOD MANAGED CERTIFICATION				
Food Storage	11	Hazardous Mat.				NOTE: KEEP CURRENT FACILITY PERMIT AND FOOD MANAGER CERTIFICATION ONSITE				
ш	12	Spoils				ONSITE				
o.	<b>+</b>	Wash/ Sanitize								
Uten./Equip.	14	Equip. Condition								
en./E	15	Utensil Condition								
Ųŧ	16	Storage		X						
Employee	<b>t</b>	Handwashing		<u> </u>						
		Employee Hygiene								
oldu	_	Employee Habits								
Ш		Food Cert./ Card								
e	21	Water								
Water	22	Cross Con.								
	23	Liquid Waste								
Waste	24	Refuse								
Ë	25	Rodents/ Insects								
Vermin	26	Animal/ Fowl								
	27	Ventilation								
"	28	Doors								
Facilities	29	Floors								
Faci	30	Walls - Ceilings								
	31	Toilet Fac.								
	32	Janitorial Fac.								
	33	Lighting								
oi.		Clothing - Linen								
Misc.	_	Signs								
		Misc.								
			OUT =	Out	of con	apliance COS = Corrected on-site				
Receive	ed By	y (Print): Anna B	araja	as		Received by Signature): Date: 5/17/2023				
REHS (	Print	Alexa Roche	Э			REHS (Signature): Phone: 530-841-2117				
						Last modified 4/12/2023				

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Facility Name:	El Tio Chuy Restaurant	
	The marked items represent Health Code violations and	must be corrected as follows:
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	•	
Name	Description (Otto et al.)	
Received By (Print): Ar	Received by (Signature): na Barajas	Date: 5/17/2023
REHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

Facility Name:	El Tio Chuy Restaurant	
	The marked items represent Health Code violations and must be corrected	as follows:
No. 10 (01.0)	Described by (Company)	Date
Received By (Print): Ann	Received by (Signature): na Barajas	Date: 5/17/2023
REHS (Print)	REHS (Signature):	Phone:

530-841-2117

Álexa Roche

Facility Name:	El Tio Chuy Restaurant	
	The marked items represent Health Code violations and must be corrected as follows:	
Received By (Print): Anr	Received by (Signature): Date na Barajas	e: 5/17/2023
REHS (Print): Alexa Ro	REHS (Signature): Photoche	ne: 30-841-2117