

## **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 Name: Miner Perk Permit # 609544   |                                   |                     |     |     |     |  |  |  |  |  |  |  |
|---|-----------------------------------|---------------------|-----|-----|-----|--|--|--|--|--|--|--|
| Address: 1573 S Main Street Yreka CA96097   |                                   |                     |     |     |     |  |  |  |  |  |  |  |
| Permit  | Permit Holder: Permit To Operate: |                     |     |     |     |  |  |  |  |  |  |  |
| ○ Valid ○ Not Valid   |                                   |                     |     |     |     |  |  |  |  |  |  |  |
| Phone   |                                   |                     |     |     |     | E-mail:  |  |  |  |  |  |  |
| Food S  | Safet                             | ty Certified Employ | ee: |     |     | Expiration Date:   |  |  |  |  |  |  |
|   |                                   |                     | MAJ | OUT | cos | The marked items represent Health Code violations and must be corrected as follows:  |  |  |  |  |  |  |
| <u>a</u>  | 1                                 | Food Temp.          |     | X   |     |  |  |  |  |  |  |  |
| ⊢ ⊢   | 2                                 | Prep./ Service      |     |     |     | ROUTINE INSPECTION CONDUCTED ON THIS DATE  |  |  |  |  |  |  |
|   | 3                                 | Storage/ Disp.      |     |     |     | 1) Observed breakfest assessable at 91 E and chicken at 101 E citting on the counter   |  |  |  |  |  |  |
| ≓   | 4                                 | Frozen Food         |     |     |     | 1) Observed breakfast casserole at 81 F and chicken at 101 F sitting on the counter cooling. After heating or cooking potentially hazardous food from scratch it should be |  |  |  |  |  |  |
| Protection Time/  | 5                                 | Pure Food           |     |     |     | cooled rapidly from 135 F to 41 F or below within 4 hours and during this time the   |  |  |  |  |  |  |
|   | 6                                 | Reused Food         |     |     |     | decrease in temperature from 135 F to 70 F shall occur within 2 hours. Facility is   |  |  |  |  |  |  |
|   | 7                                 | Transportation      |     |     |     | instructed to move food into refrigeration to ensure that the food is cooled within the  |  |  |  |  |  |  |
|   | 8                                 | Storage Fac.        |     |     |     | proper time frames and keep time/temperature logs on-site for inspection.  |  |  |  |  |  |  |
| Food Storage  | 9                                 | Refrig. Units       |     |     |     |  |  |  |  |  |  |  |
|   | 10                                | Thermometer         | İ   | X   |     | 40) Observed facility not beginn a thermometer available to measure temporature of   |  |  |  |  |  |  |
|   | 11                                | Hazardous Mat.      |     |     |     | 10) Observed facility not having a thermometer available to measure temperature of cooling foods. Temperature measuring devices should be easily readable and available    |  |  |  |  |  |  |
|   | 12                                | Spoils              |     |     |     | on-site. Facility is instructed to keep a temperature measuring device on-site.  |  |  |  |  |  |  |
| Uten./Equip.  | 13                                | Wash/ Sanitize      |     |     |     | on one i admity to mended to heap a temperature measuring across on one.   |  |  |  |  |  |  |
|   | 14                                | Equip. Condition    |     |     |     |  |  |  |  |  |  |  |
|   | 15                                | Utensil Condition   |     |     |     |  |  |  |  |  |  |  |
| ž   | 16                                | Storage             |     |     |     |  |  |  |  |  |  |  |
| a)  | 17                                | Handwashing         |     |     |     |  |  |  |  |  |  |  |
| )<br>)  | 18                                | Employee Hygiene    |     |     |     |  |  |  |  |  |  |  |
| Employee  | 19                                | Employee Habits     |     |     |     |  |  |  |  |  |  |  |
| Ш   | 20                                | Food Cert./ Card    |     |     |     |  |  |  |  |  |  |  |
| ter   | 21                                | Water               |     |     |     |  |  |  |  |  |  |  |
| Water   | 22                                | Cross Con.          |     |     |     |  |  |  |  |  |  |  |
| Waste   | 23                                | Liquid Waste        |     |     |     |  |  |  |  |  |  |  |
| Wa  | 24                                | Refuse              |     |     |     |  |  |  |  |  |  |  |
| /ermin  | 25                                | Rodents/ Insects    |     |     |     |  |  |  |  |  |  |  |
| Ver   | 26                                | Animal/ Fowl        |     |     |     |  |  |  |  |  |  |  |
|   | 27                                | Ventilation         |     |     |     |  |  |  |  |  |  |  |
| õ   | 28                                | Doors               |     |     |     |  |  |  |  |  |  |  |
| -acilities  | 29                                | Floors              |     |     |     |  |  |  |  |  |  |  |
| Fac   | 30                                | Walls - Ceilings    |     |     |     |  |  |  |  |  |  |  |
|   | 31                                | Toilet Fac.         |     |     |     |  |  |  |  |  |  |  |
|   | 32                                | Janitorial Fac.     |     |     |     |  |  |  |  |  |  |  |
|   | 33                                | Lighting            |     |     |     |  |  |  |  |  |  |  |
| ΰ   | 34                                | Clothing - Linen    |     |     |     |  |  |  |  |  |  |  |
| Misc.   | 35                                | Signs               |     |     |     |  |  |  |  |  |  |  |
|   |                                   | Misc.               |     |     |     |  |  |  |  |  |  |  |
| MAJ = Major violation OUT = Out of compliance COS = Corrected on-site   |                                   |                     |     |     |     |  |  |  |  |  |  |  |
| Received By (Print): Received by (Signature): Date:  Jessica Burch  Received by (Signature): 6/14/2023Jessica |                                   |                     |     |     |     |  |  |  |  |  |  |  |
| REHS (Print): REHS (Signature): Phone: 530-841-2117   |                                   |                     |     |     |     |  |  |  |  |  |  |  |
|   |                                   |                     |     |     |     |  |  |  |  |  |  |  |

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| Facility Name:       | Miner Perk  |                          |
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|                      | The marked items represent Health Code violations and must be corrected as follows: |                          |
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| Received By (Print): | Received by (Signature):  essica Burch  | ate:<br>6/14/2023Jessica |
| REHS (Print):        |   | hone:                    |

530-841-2117

Alexa Roche

| Facility Name:             | Miner Perk |  |                           |
|----------------------------|------------|--|---------------------------|
|                            |            | epresent Health Code violations and must be co | orrected as follows:      |
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|                            |            | Description (O'markers)                        |                           |
| Received By (Print):  Jess | sica Burch | Received by (Signature):                       | Date:<br>6/14/2023Jessica |
| REHS (Print):<br>Alexa R   | oche       | REHS (Signature):                              | Phone:<br>530-841-2117    |

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| Received By (Print): |                 | Received by (Signature):                        | Date:                 |
|                      | sica Burch      | , <b>,</b>                                      | 6/14/2023Jessica      |
| REHS (Print):        |                 | REHS (Signature):                               | Phone:                |
| Alexa Ro             | oche            |   | 530-841-2117          |