



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

| | |
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| Facility Name: Shenaniganz Eat Drink Play | Permit # 000855 |
| Address: 612 S Main St Yreka CA 96097 | |
| Permit Holder: Aimee Lantz | Permit To Operate: <input checked="" type="radio"/> Valid <input type="radio"/> Not Valid |
| Phone: 530-572-1500 | E-mail: |
| 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. | | | | <p style="text-align: center; margin-top: 0;">ROUTINE INSPECTION CONDUCTED ON THIS DATE</p> <p>16) Observed exposed wood shelving for the storage of cooking wares and bread. Food storage should be smooth, durable, nonabsorbent, and cleanable. Repair or replace shelving within the next 30 days.</p> <p>20) Obtain Food Manager certification within the next 60 days.</p> <p>29) Observed buildup of dirt and debris in the hard to reach areas of the food preparation area. Wash and sanitize immediately.</p> |
| | 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 | | | | |
| | 16 Storage | | X | | |
| Employee | 17 Handwashing | | | | |
| | 18 Employee Hygiene | | | | |
| | 19 Employee Habits | | | | |
| | 20 Food Cert./ Card | | X | | |
| Water | 21 Water | | | | |
| | 22 Cross Con. | | | | |
| Waste | 23 Liquid Waste | | | | |
| | 24 Refuse | | | | |
| Vermin | 25 Rodents/ Insects | | | | |
| | 26 Animal/ Fowl | | | | |
| Facilities | 27 Ventilation | | | | |
| | 28 Doors | | | | |
| | 29 Floors | | X | | |
| | 30 Walls - Ceilings | | | | |
| | 31 Toilet Fac. | | | | |
| | 32 Janitorial Fac. | | | | |
| | 33 Lighting | | | | |
| Misc. | 34 Clothing - Linen | | | | |
| | 35 Signs | | | | |
| | 36 Misc. | | | | |

| |
|--|
| MAJ = Major violation OUT = Out of compliance COS = Corrected on-site |
| Received By (Print): Summer Giertz Received by (Signature): _____ Date: 8/23/2023 |
| REHS (Print): Alexa Roche REHS (Signature): _____ Phone: 530-841-2117 |

Facility Name: Shenaniganz Eat Drink Play

The marked items represent Health Code violations and must be corrected as follows:

Received By (Print):
Summer Giertz

Received by (Signature):

Date:
8/23/2023

REHS (Print):
Alexa Roche

REHS (Signature):

Phone:
530-841-2117

Facility Name: Shenaniganz Eat Drink Play

The marked items represent Health Code violations and must be corrected as follows:

[Empty area for listing health code violations and correction details]

| | | |
|---------------------------------------|--------------------------|--------------------|
| Received By (Print): Summer Giertz | Received by (Signature): | Date: 8/23/2023 |
|---------------------------------------|--------------------------|--------------------|

| | | |
|------------------------------|-------------------|------------------------|
| REHS (Print): Alexa Roche | REHS (Signature): | Phone: 530-841-2117 |
|------------------------------|-------------------|------------------------|

Facility Name: Shenaniganz Eat Drink Play

The marked items represent Health Code violations and must be corrected as follows:

Empty space for listing health code violations and correction details.

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| Received By (Print): Summer Giertz | Received by (Signature): | Date: 8/23/2023 |
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| REHS (Print): Alexa Roche | REHS (Signature): | Phone: 530-841-2117 |
|------------------------------|-------------------|------------------------|