



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: Hornbrook Elementary	Permit # 000262
Address: 15305 Oregon Street Hornbrook, CA 96044	
Permit Holder: Hornbrook Elementary	Permit To Operate: <input checked="" type="radio"/> Valid <input type="radio"/> Not Valid
Phone: 530-475-3598	E-mail: srobinson@hornbrookscool.org
Food Safety Certified Employee: Stephanie Robinson	Expiration Date: 03/2028

		MAJ	OUT	COS	
					The marked items represent Health Code violations and must be corrected as follows:
Protection Time/ Temp.	1	Food Temp.			ROUTINE INSPECTION CONDUCTED ON THIS DATE 14) Observed bare wood shelving in the dry food storage area. All shelving used for food storage should smooth, durable, nonabsorbent, and cleanable. Repair or replace within the next 60 days.
	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	X		
	15	Utensil Condition			
	16	Storage			
Employee	17	Handwashing			
	18	Employee Hygiene			
	19	Employee Habits			
	20	Food Cert./ Card			
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			
	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): Stephanie Robinson	Received by (Signature): _____ Date: 9/14/2023
REHS (Print): Alexa Roche	REHS (Signature): _____ Phone: 530-841-2117

Facility Name: Hornbrook Elementary

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

Received By (Print):
Stephanie Robinson

Received by (Signature):

Date:
9/14/2023

REHS (Print):
Alexa Roche

REHS (Signature):

Phone:
530-841-2117

Facility Name: Hornbrook Elementary

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): Stephanie Robinson	Received by (Signature):	Date: 9/14/2023
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REHS (Print): Alexa Roche	REHS (Signature):	Phone: 530-841-2117
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Facility Name: Hornbrook Elementary

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

Received By (Print): Stephanie Robinson	Received by (Signature):	Date: 9/14/2023
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REHS (Print): Alexa Roche	REHS (Signature):	Phone: 530-841-2117
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