



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: MOUNTAIN EXPRESSO	Permit # 000338
Address: 1976 SHASTINA DR. WEED, CA 96094	
Permit Holder: DENNIS ERICKSON	Permit To Operate: <input checked="" type="radio"/> Valid <input type="radio"/> Not Valid
Phone: 530-938-2324	E-mail:
Food Safety Certified Employee: MICHELLE CONGER	Expiration Date: 10/2025

		MAJ	OUT	COS	The marked items represent Health Code violations and must be corrected as follows:
Protection Time/ Temp.	1 Food Temp.				<p>ROUTINE INSPECTION DONE THIS DATE</p> <p>29) Observed throughout facility where paint has worn off, exposing concrete. All floors are to be smooth, easily-cleanable, nonabsorbent, and durable. Repair within 90 days.</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				
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		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): Chase Lapthorne Received by (Signature): _____ Date: 09/26/2023
REHS (Print): Chalyn Dewey REHS (Signature): _____ Phone: 530-841-2112

Facility Name: MOUNTAIN EXPRESSO

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

Received By (Print): Chase Lapthorne Received by (Signature): Date: 09/26/2023

REHS (Print): Chalyn Dewey REHS (Signature): Phone: 530-841-2112

Facility Name: MOUNTAIN EXPRESSO

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

Received By (Print):
Chase Lapthorne

Received by (Signature):

Date:
09/26/2023

REHS (Print):
Chalyn Dewey

REHS (Signature):

Phone:
530-841-2112

Facility Name: MOUNTAIN EXPRESSO

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

Received By (Print):
Chase Lapthorne

Received by (Signature):

Date:
09/26/2023

REHS (Print):
Chalyn Dewey

REHS (Signature):

Phone:
530-841-2112