

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: Dunsmuir Elementary 000207										
Address: 4760 Siskiyou Ave. Dunsmuir, CA										
Permit	Permit Holder: Permit To Operate:									
		Dunsmuir I	Elem	enta	ary	Valid Not Valid				
Phone: 530-235-4828 E-mail: dhalley@dunsmuir.k12.ca.us										
Food Safety Certified Employee: Danielle Nani Expiration Date: 7/2027										
				OUT		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				13) Observed excessive buildup of slime or mold inside of the ice machine. Maintain				
	5	Pure Food				equipment in a cleanly and serviceable condition at all times. Discard ice and clean ice				
	6	Reused Food				machine in accordance with manufacturer's instructions.				
д.	7	Transportation				30) Observed excessive buildup of dust above dry food in the dry food storage area				
Ð	8	Storage Fac.				upstairs. Store prevent, and protect all food from contamination. Clean asap.				
orag	9	Refrig. Units								
Food Storage	10	Thermometer								
00	11	Hazardous Mat.								
	12	Spoils								
uip.	13	Wash/ Sanitize		Х						
Uten./Equip.	14	Equip. Condition								
ten.	15	Utensil Condition								
		Storage								
e	-	Handwashing								
Employee		Employee Hygiene								
ШШ	-	Employee Habits								
		Food Cert./ Card								
Water	_	Water Cross Con.								
	-									
Waste	-	Liquid Waste								
	-	Refuse								
/ermin	-	Rodents/ Insects Animal/ Fowl								
>										
		Ventilation Doors								
ties										
Facilities	-	Floors Walls - Ceilings		$\overline{\mathbf{v}}$						
ЦĹ.		Toilet Fac.		X						
	31	Janitorial Fac.								
		Lighting	H							
		Clothing - Linen								
Misc.										
2		Misc.								
MAJ =			)UT =	Out	of con	npliance COS = Corrected on-site				
Receiv	ed By	y (Print): Danielle	Na	ni		Received by (Signature): Date: 9/28/2023				
REHS (Print): REHS (Signature): Phone:					REHS (Signature): Phone: 530-841-2112					
L			,							

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Received By (Print):	Received by (Sig	nature):	Date:
D:	anielle Nani		9/28/2023
REHS (Print):	REHS (Signature	2).	Phone:
Chalyn E	Dewev	<i>,</i> ],	530-841-2112
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