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: Alua's Thrive Bar 000659											
Address: 315 Chestnut St. Mount Shasta, CA											
Permit			01.1	loui		Permit To Operate:					
		Alua Probi	otics	, LL(С	● Valid O Not Valid					
Phone	: E	530-918-3388				^{E-mail:} nion@aluakombucha.com					
Food S	Food Safety Certified Employee: Nion Sheppard Expiration Date: 06/2027										
	The marked items represent Health Code violations and must be corrected as follows:										
Protection Time/ Temp.	1	Food Temp.		out X	X						
	2	Prep./ Service	1	X	X	1) Observed sold food measuring between 42.40 degrees F in deligner society light					
	3	Storage/ Disp.				1) Observed cold food measuring between 42-49 degrees F in deli-prep cooler. Hold cold food at 41 degrees F or below. Corrected during inspection.					
	4	Frozen Food	1								
	5	Pure Food				1) Observed cut fruit and kale measuring between 55-65 degrees F in reach-in cooler at					
	6	Reused Food				the bar station. Hold cold food at 41 degrees or below. Voluntarily discarded.					
	7	Transportation				9) Observed refrigeration unit mentioned above not holding temperature as indicated on					
Food Storage	8	Storage Fac.				external digital thermometer. Discontinue use for holding any potentially hazardous food					
	9	Refrig. Units		X		until unit is repaired or replaced.					
	10	Thermometer									
	11	Hazardous Mat.				2) Observed scoops without handles being used to portion food at deli-prep cooler.					
	12	Spoils				Utilize scoops with handles to prevent contaminating portioned food. Corrected on site.					
in.	13	Wash/ Sanitize		X		13) Observed buildup of pink slime or mold in ice machine. Maintain all equipment in a					
Uten./Equip.	14	Equip. Condition		X		serviceable and cleanable condition. Wash, rinse, and sanitize according to manufacturers instructions. Correct immediately.					
ten.		Utensil Condition									
	16	Storage				14) Observed "Household Lies Only" inste not in food properties. Ensure all acquinment					
e	17	Handwashing				14) Observed "Household Use Only" Insta-pot in food prep area. Ensure all equipn used in food facility are ANSI certified or NSF approved. Discontinue using this equipment or replace with a commercial NSF listed unit. Correct asap.					
loye	18	Employee Hygiene									
Employee	-	Employee Habits									
		Food Cert./ Card	<u> </u>			14) Observed a baking oven without hood being used in the kitchen. Ensure a hood					
Water		Water				mechanical exhaust ventilation equipment is install to effectively remove steam, smoke, heat, vapor, etc. If unit creates any of the mentioned output above, remove from facility					
		Cross Con.				immediately.					
Waste	_	Liquid Waste									
		Refuse				29) Observed epoxy peeling on the floor in kitchen prep area. Maintain floor surfaces in					
Vermin		Rodents/ Insects Animal/ Fowl				food prep area to be smooth, durable in construction, easily cleanable, and					
>						nonabsorbent. Repair within 90 days.					
		Ventilation Doors									
ties	-	Floors		×							
Facilities		Walls - Ceilings									
ш	31	Toilet Fac.									
	32										
1		Lighting									
Misc.	1	Clothing - Linen	H								
		Signs									
		Misc.									
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site											
Received By (Print): Received by (Signature): Date: Nion Sheppard 10/04/2023											
REHS (Print): REHS (Signature): Phone:											
Chalyn Dewey 530-841-2112											

Last modified 4/12/2023

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Nion Sheppard

REHS (Signature):

10/04/2023

530-841-2112

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REHS (Print): Chalyn Dewey

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