## **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: Gold Rush Burgers Permit # 000244											
Addres	ss:	1240 S. Main :				A 96097					
Permit	Hole	der: Kenton and	d Del	obie	Rus	Permit To Operate:  h  Permit To Operate:					
Phone			<u> </u>		rtuo	E mail:					
	550-042-2177 Habjib 1969@Outlook.com										
roou s	aiei	y Certified Employ	IV			yford Expiration Date: 07/2024					
ı			MAJ	OUT	cos	The marked items represent Health Code violations and must be corrected as follows:					
Protection Time/ Temp.		Food Temp.		X		ROUTINE INSPECTION CONDUCTED THIS DATE					
		Prep./ Service									
	-	Storage/ Disp.				1) Observed tomatoes, cheese, lettuce, and other cold food measuring between 42-49					
		Frozen Food				degrees F in the deli-prep station. Hold all cold food at 41F or below, or dairy products at					
		Pure Food				45F or below. Correct immediately.					
		Reused Food				8) Observed canned food stored on the ground, underneath the prep table, in the c					
ш.	-	Transportation				area. Keep all food 6" off the ground. Correct immediately.					
ge		Storage Fac.		X							
Food Storage		Refrig. Units	<u> </u>			11) Observed bottles that are not labeled in the ware-washing area. Label all bottles to					
		Thermometer				prevent misuse of chemical products. Correct immediately.					
F00		Hazardous Mat.		X		13) Observed facility is without test strips to measure disinfectant level. Utilize test strips					
		Spoils				to properly measure disinfectant of 100ppm chlorine or 200ppm quat. Correct					
Uten./Equip.		Wash/ Sanitize		X		immediately.					
./Eq		Equip. Condition		X							
Jten		Utensil Condition				13, 14) Observed buildup of grease and dirt on the meat slicer. Wash, rinse, and					
		Storage				sanitize meat slicer daily to prevent growth of pathogens. Correct immediately.					
e e		Handwashing				21) Observed the indirect plumbing of the 3 compartment sink without a 1" gap from the					
Employee		Employee Hygiene				floor sink. Ensure indirect plumbing has atleast 1" floor gap from the floor sink to prevent					
Emp	-	Employee Habits				backsiphonage into potable water system. Repair or correct within 90 days.					
		Food Cert./ Card				20) Observed point pooling or demonstrate EDD finishes on the well. Maintain all well					
Water	-	Water		X		30) Observed paint peeling or damages to FRP finishes on the wall. Maintain all wall surfaces are easily cleanable, nonabsorbent, durable, and smooth. Repair within 90					
		Cross Con.				days.					
Waste		Liquid Waste									
≥		Refuse				33) Observed lighting fixture without a shield. Ensure light bulbs are shielded or shatter-					
Vermin		Rodents/ Insects				resistant in areas where there is food, clean equipment, utensils, linens, or unwrapped					
Š		Animal/ Fowl				single-use towels. Correct or repair immediately.					
		Ventilation									
es		Doors	ш								
Facilities		Floors	Ш								
ъ		Walls - Ceilings	Ш	X							
		Toilet Fac.									
	32	Janitorial Fac.									
		Lighting		X							
Misc.	34	Clothing - Linen									
		Signs									
N4^ !		Misc.		0:::	4.5-	linnes COC Covered on site					
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site  Received By (Print): Received by (Signature): Date:											
Melody Byford 10/13/2023											
REHS (Print): REHS (Signature): Phone: Chalyn Dewey 530-841-2112											

Facility Name: Gold Rush Burge	ers	
The marked iter	ns represent Health Code violations and must be co	orrected as follows:
Described Described A	Descriped by (Circulature)	
Received By (Print):  Melody Byford	Received by (Signature):	Date: 10/13/2023
REHS (Print):	REHS (Signature):	Phone:
Chalyn Dewey		530-841-2112

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		Described by (O'mentum)	2 :
	ody Byford	Received by (Signature):	Date: 10/13/2023
REHS (Print): Chalyn [	 Dewey	REHS (Signature):	Phone: 530-841-2112

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