



### 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: <b>Seven Sons Coffee</b>	Permit # <b>000414</b>
Address: <b>1011 S Mount Shasta Blvd., Mount Shasta, CA</b>	
Permit Holder: <b>Anne Rivera</b>	Permit To Operate: <input checked="" type="radio"/> Valid <input type="radio"/> Not Valid
Phone: <b>530-926-9701</b>	E-mail: <b>annerivera2164@yahoo.com</b>
Food Safety Certified Employee: <b>Anne Rivera</b>	Expiration Date:

		MAJ	OUT	COS	The marked items represent Health Code violations and must be corrected as follows:
Protection Time/ Temp.	1 Food Temp.		X		<p style="text-align: center; font-weight: bold; margin-bottom: 10px;">ROUTINE INSPECTION CONDUCTED THIS DATE</p> <p>1, 2) Observed potatoes and sliced tomatoes in deli-prep cooler measuring between 51-61 degrees F. If facility is using time as a control, then utilize a label that marks or identifies the time that is 4 hours past the point in time when the food is removed from temperature control. If facility is using temperature as a control, then hold cold food at 41 degrees F or hot food at 135 degrees F. Correct immediately.</p> <p>17) Observed facility is currently using the 3-compartment sink for hand-washing and ware-washing. This sink must be sanitized prior to ware-washing and cannot be used simultaneously. Continue to monitor and ensure employees are trained of proper procedures.</p> <p>13, 14) Observed mechanical ware-washing dispensing 10ppm chlorine. Effective mechanical ware-washing disinfectant measuring at 50ppm chlorine. Discontinue use of mechanical ware-washer and use 3-compartment sink to rinse, wash, and sanitize equipments, utensils, etc., until corrected. Use test strips daily to measure disinfectant.</p> <p>20) Facility does not have a current food manager certificate. Provided facility with Food Manager's course business card.</p>
	2 Prep./ Service		X		
	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		X		
	14 Equip. Condition		X		
	15 Utensil Condition				
	16 Storage				
Employee	17 Handwashing		X		
	18 Employee Hygiene				
	19 Employee Habits				
	20 Food Cert./ Card		X		
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): <b>Anne Rivera</b> Received by (Signature): _____      Date: <b>10/17/2023</b>
REHS (Print): <b>Chalyn Dewey</b> REHS (Signature): _____      Phone: <b>530-841-2112</b>

**Facility Name:** Seven Sons Coffee

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

Empty space for listing health code violations and correction details.

Received By (Print): Anne Rivera	Received by (Signature):	Date: 10/17/2023
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REHS (Print): Chalyn Dewey	REHS (Signature):	Phone: 530-841-2112
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Date:  
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