

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: Butte Valley Bed and Breakfast Permit #											
Address: 200 S California St Dorris CA 96023											
Permit	Hol	der:		-l <i>i</i>	O	Permit To Operate:					
Kerry and Brandon Criss O Valid Not Valid											
	Phone: 530-905-3711 E-mail: kerrybuttevalleybandb@gmail.com										
Food Safety Certified Employee: Kerry Criss Expiration Date: 11/2026											
			MAJ	OUT	COS	The marked items represent Health Code violations and must be corrected as follows:					
Protection Time/ Temp.	1	Food Temp.				ROUTINE INSPECTION CONDUCTED ON THIS DATE					
	2	Prep./ Service									
	3	Storage/ Disp.				This facility underwent a change of ownership from the Hospitality Inn to Butte Valley Bed and Breakfast, facility did not close. Application for permit has been completed and permit fees will					
	4	Frozen Food				need to paid as soon as possible.					
ctio		Pure Food									
rote	6	Reused Food									
₾	_	Transportation									
ge	_	Storage Fac.									
Food Storage		Refrig. Units									
		Thermometer									
Foc		Hazardous Mat.									
		Spoils									
Uten./Equip.		Wash/ Sanitize									
./Eq		Equip. Condition									
Jten		Utensil Condition									
		Storage									
e e		Handwashing									
Employee		Employee Hygiene									
Em		Employee Habits Food Cert./ Card									
_											
Water		Water Cross Con.									
		Liquid Waste									
Waste		Refuse									
ı.		Rodents/ Insects									
ermin		Animal/ Fowl									
>		Ventilation									
		Doors									
ities		Floors									
Facilities		Walls - Ceilings									
ш		Toilet Fac.									
		Janitorial Fac.									
		Lighting									
SC.		Clothing - Linen									
		Signs									
		Misc.									
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site											
Received By (Print): Received by (Signature): Date: Kerry Criss 10/24/2023											
REHS (Print): Alexa Roche						REHS (Signature): Phone: 530-841-2117					

Facility Name:	Butte Valley Bed and Breakfast	
	The marked items represent Health Code violations and must be corr	ected as follows:
Received By (Print):	Received by (Signature):	Date:
Ke	erry Criss	10/24/2023
REHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

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Received By (Print): Kern	Received by (Signature): y Criss	Date: 10/24/2023
REHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

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