

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	/ Na	^{me:} Grenada I	Elem	entar	у		Permit #	000248		
Addres	SS:	516 Shasta Bl	vd G	renad	la C	A 96038				
Permit	Hol	^{der:} Grenada E	leme	entary	,		Permit To Valid	Operate: Not Valid		
Phone	;	530-436-0365					enada.k12.ca.us			
Food Safety Certified Employee: Keri Patti Expirati								Date: 05/2027		
MAJ OUT COS							h Code violations and must be corrected			
Protection Time/ Temp.	1	Food Temp.				·	PECTION CONDUCTED ON THIS			
	2	Prep./ Service								
	3	Storage/ Disp.								
	4	Frozen Food				SATISF.	SATISFACTORY AT PRESENT TIME			
	5	Pure Food								
	6	Reused Food								
	7	Transportation								
Food Storage	8	Storage Fac.								
	9	Refrig. Units	<u> </u>							
	10	Thermometer								
		Hazardous Mat.								
	_	Spoils								
uip.	_	Wash/ Sanitize	<u> </u>							
Uten./Equip.	_	Equip. Condition								
Jten		Utensil Condition	<u> </u>							
٦_		Storage								
9		Handwashing								
Employee	_	Employee Hygiene								
Em		Employee Habits								
_	-	Food Cert./ Card								
Water		Water Cross Con.								
S 0	_		-							
Waste		Liquid Waste Refuse								
> -										
Vermin	_	Rodents/ Insects Animal/ Fowl								
>										
		Ventilation Doors								
ties		Floors								
Facilities		Walls - Ceilings	\vdash							
ш		Toilet Fac.								
		Janitorial Fac.								
	-	Lighting								
		Clothing - Linen								
Misc.	_	Signs		H	-					
		Misc.			\dashv					
MAJ =			DUT =	Out of	f com	Inpliance COS = Corrected on-site				
	Received By (Print): Received by (Signature): Date: Keri Patti 11/14/2023									
REHS (Print): REHS (Signature): Phone: 530-841-2117							30-841-2117			

Facility Name:	Grenada Elementary	
	The marked items represent Health Code violations and must be	pe corrected as follows:
,		
Received By (Print):	Received by (Signature):	Date:
	eri Patti	11/14/2023
REHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

Facility Name:	Grenada Elementary	
	The marked items represent Health Code violations and must be corrected as follow	/S:
Received By (Print):	Received by (Signature):	Date:
Keri	i Patti	11/14/2023
RFHS (Print).	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

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Ker	i Patti	11/14/2023
REHS (Print): Alexa Ro	REHS (Signature): Pho	ne: 30-841-2117