

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: Montague Elementary Cafeteria Permit # 000334											
Addres	SS:	430 Prather S			_						
Permit Holder: Montague Elementary Cafeteria Permit To Operate: O Valid Not Valid											
Phone: 530-451-3001 E-mail: vnicholson@montague.k12.ca.us											
Food Safety Certified Employee: Vanessa Nicholson Expiration Date: 07/2025											
				OUT		Health Code violations and must be corrected as follows:					
Protection Time/ Temp.	1	Food Temp.	IVIAG	001	,00		SPECTION CONDUCTED ON THIS DATE				
		Prep./ Service				ROOTINE INS	FECTION CONDUCTED ON THIS DATE				
	_	Storage/ Disp.									
	_	Frozen Food				SATIS	FACTORY AT PRESENT TIME				
	5	Pure Food									
otecl	6	Reused Food									
Pro	7	Transportation									
_	-	Storage Fac.									
age.	-	Refrig. Units									
Food Storage	10	Thermometer	† †	1							
poc	11	Hazardous Mat.									
ш	12	Spoils									
<u>а</u>	13	Wash/ Sanitize									
Equi	14	Equip. Condition									
Uten./Equip.	15	Utensil Condition									
Ť	16	Storage									
е	17	Handwashing									
oye	18	Employee Hygiene									
Employee	19	Employee Habits									
	20	Food Cert./ Card									
Water	21	Water									
Š		Cross Con.									
Waste		Liquid Waste									
Š	24	Refuse									
Vermin		Rodents/ Insects									
\e	26	Animal/ Fowl									
	-	Ventilation									
es		Doors									
Facilities		Floors	Ш								
Еа	30	Walls - Ceilings	Ш								
		Toilet Fac.	Ш								
		Janitorial Fac.									
SC.		Lighting									
		Clothing - Linen									
Σ		Signs		_							
MA.I –		Misc. or violation (OUT -	Out of	com	npliance COS = Corrected on-site					
Received By (Print): Received by (Signature): Date:											
Vanessa Nicholson 11/8/2023											
REHS (Print): Alexa Roche						REHS (Signature):	Phone: 530-841-2117				

Facility Name:	Montague Elementary Cafeteria	
	The marked items represent Health Code violations and must be c	orrected as follows:
Received By (Print):	Received by (Signature): nessa Nicholson	Date: 11/8/2023
REHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

Facility Name:	Montague Elementary Cafeteria	
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REHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

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REHS (Print): Alexa Ro	oche	REHS (Signature):	Phone: 530-841-2117