

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: Golden Ea	agle	Cha	ter S	School	Permit # 000618					
Addres	s:	1515 S. Orego	n St	Ste	A, Y	reka, CA 96097	_					
Permit	Hol	^{der:} Golden Ea	gle (Char	ter S	chool	Permit To Op Valid	perate: Not Valid				
Phone	5	30-926-5800	ext 8	06		E-mail: operations@gecs.org						
Food S		ty Certified Employ				1 0	Expiration Da	ate:				
				OUT	cos	The marked items represent Health Code violations	and must be corrected as	s follows:				
Ċ.	1	Food Temp.		00.	000	·						
, poo-	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED						
	3	Storage/ Disp.				13) Observed manual sanitizer in spray bottle measuring between 10-50ppm						
	4	Frozen Food				Maintain manual chlorine sanitizer at 100ppm. Utiliz	nitizer at 100ppm. Utilize test strips to measure proper					
	5	Pure Food				sanitizing concentration daily or as needed. Discont	itizer spray bottle					
	6	Reused Food				and utilize Lysol wipes until correction has been made.						
	7	Transportation				1						
	8	Storage Fac.				1						
	9	Refrig. Units										
	10	Thermometer										
	11	Hazardous Mat.										
	12	Spoils										
Uten./Equip.	13	Wash/ Sanitize		X								
	14	Equip. Condition										
ten.,	15	Utensil Condition										
Ò	16	Storage										
ie.	17	Handwashing										
Employee	18	Employee Hygiene										
_m=		Employee Habits										
		Food Cert./ Card				_						
Water		Water				4						
		Cross Con.										
Waste		Liquid Waste										
		Refuse										
/ermin		Rodents/ Insects	-									
γ		Animal/ Fowl										
		Ventilation	Н									
ies		Doors	Н			4						
Facilities		Floors	Н			<u>-</u> -						
Fį		Walls - Ceilings										
		Toilet Fac.										
		Janitorial Fac.	Н									
		Lighting Clothing - Linen										
Misc		-	Н									
		Signs Misc.		×								
MAJ =			DUT =		of com	apliance COS = Corrected on-site						
						Received by (Signature):	Date: 11/17	7/2023				
REHS (Print): Chalyn Dewey						REHS (Signature):	Phone: 530-	841-2112				

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Facility Name:	Golden Eagle Charter School	
	The marked items represent Health Code violations and must be corrected as follow	S:
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