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	y Na	^{me:} Fraternal	Orde	er of I	Eagl	es Permit # 000238	
Addres	ss:						
Permit Holder: Permit To Operate:							
Fraternal Order of Eagles							
Phone	[:] 5	530-235-4313				E-mail:	
Food	Food Safety Certified Employee: Expiration Date:						
			MAJ	OUT	COS	The marked items represent Health Code violations and must be corrected as follows:	
Protection Time/ Temp.	1	Food Temp.					
	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE	
	3	Storage/ Disp.				13) Observed buildup of slime or mold in the ice machine. Dispose all ice and	
	-	Frozen Food	1			discontinue use of ice machine until unit has been washed, rinsed, and sanitized	
tion	5	Pure Food				according to manufacturers instruction. Correct immediately.	
otect	6	Reused Food					
Pro	7	Transportation				14) Observed a new ice machine bins and ice machine installed in the facility that has	
	8	Storage Fac.				not been approved. All new or replaced equipment should be ANSI certified or NSF approved. Provide a manufacturers cut sheet to our department for approval or prior to	
rage	9	Refrig. Units				purchase.	
Storage	10	Thermometer	† · ·				
Food	11	Hazardous Mat.				36) Observed the 3 compartment sink, ice machine and box draining into a floor sink	
ц	12	Spoils				without a 1" airgap. Ensure these units are plumbed indirectly to a floor sink with a 1" air	
Uten./Equip.	13	Wash/ Sanitize		X		gap. Correct immediately.	
	14	Equip. Condition		X			
	15	Utensil Condition					
	16	Storage					
0	17	Handwashing					
Employee	18	Employee Hygiene					
dm	19	Employee Habits					
ш	20	Food Cert./ Card					
Water	21	Water					
	22	Cross Con.					
Waste	23	Liquid Waste					
	24	Refuse					
'ermin	25	Rodents/ Insects					
Ver	26	Animal/ Fowl					
	27	Ventilation					
ş	28	Doors					
Facilities	29	Floors					
Fac	30	Walls - Ceilings					
	31	Toilet Fac.					
	32	Janitorial Fac.					
	33	Lighting					
ů.	34	Clothing - Linen					
Misc.	35	Signs					
		Misc.		Х			
)UT =	Out c	of con	pliance COS = Corrected on-site	
Received By (Print): Received by (Signature): Date: Matthew McClellan 12/15/2023						Received by (Signature): Date: 12/15/2023	
REHS (Print): REHS (Signature): Phone: Chalyn Dewey 530-841-2112							

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