



**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: <b>First and Last Coffee Lounge " On the Go"</b>		Permit #
Address: <b>335 S California St Dorris CA 96023</b>		
Permit Holder: <b>Shaun and Anna Felder</b>		Permit To Operate: <input type="radio"/> Valid <input type="radio"/> Not Valid
Phone: <b>541-891-3056</b>	E-mail: <b>firstandlastcoffeelounge@gmail.com</b>	
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				
	3 Storage/ Disp.				
	4 Frozen Food				
	5 Pure Food				
	6 Reused Food				
	7 Transportation				
Food Storage	8 Storage Fac.				
	9 Refrig. Units				
	10 Thermometer				
	11 Hazardous Mat.				
	12 Spoils				
Uten./Equip.	13 Wash/ Sanitize				
	14 Equip. Condition				
	15 Utensil Condition				
	16 Storage				
Employee	17 Handwashing				
	18 Employee Hygiene				
	19 Employee Habits				
	20 Food Cert./ Card				
Water	21 Water				
	22 Cross Con.				
Waste	23 Liquid Waste				
	24 Refuse				
Vermin	25 Rodents/ Insects				
	26 Animal/ Fowl				
Facilities	27 Ventilation				
	28 Doors				
	29 Floors				
	30 Walls - Ceilings				
	31 Toilet Fac.				
	32 Janitorial Fac.				
	33 Lighting				
Misc.	34 Clothing - Linen				
	35 Signs				
	36 Misc.				

MAJ = Major violation	OUT = Out of compliance	COS = Corrected on-site
Received By (Print): <b>Shaun Felder</b>	Received by (Signature):	Date: <b>12/20/2023</b>
REHS (Print): <b>Alexa Roche</b>	REHS (Signature):	Phone: <b>530-841-2117</b>

**Facility Name:** First and Last Coffee Lounge " On the Go"

The marked items represent Health Code violations and must be corrected as follows:

*(This area is currently blank, intended for listing health code violations and their corrections.)*

Received By (Print): Shaun Felder	Received by (Signature):	Date: 12/20/2023
--------------------------------------	--------------------------	---------------------

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

**Facility Name:** First and Last Coffee Lounge " On the Go"

The marked items represent Health Code violations and must be corrected as follows:

[Empty area for listing health code violations and correction details]

Received By (Print): Shaun Felder	Received by (Signature):	Date: 12/20/2023
--------------------------------------	--------------------------	---------------------

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

**Facility Name:** First and Last Coffee Lounge " On the Go"

The marked items represent Health Code violations and must be corrected as follows:

Empty area for listing health code violations and correction details.

Received By (Print): Shaun Felder	Received by (Signature):	Date: 12/20/2023
--------------------------------------	--------------------------	---------------------

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