

FOOD FACILITY INSPECTION REPORT

GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

225 N. Tehama Street, Willows, CA 95988
Phone (530) 934-6102 FAX (530) 934-6103

Name of Facility/ DBA: ORLAND MOOSE LODGE #1901		Inspection Date: 1/10/24	
Address: 605 FIFTH ST., ORLAND, CA 95963		Reinspection Date (on or after): NEXT INSPECTION <small>(Reinspections are subject to fees)</small>	
Owner/Permitee: LOYAL ORDER OF MOOSE	Phone No.:	Inspection Time: 3:00	Permit Exp. Date:
Certified Food Handler: KEEP MGR CERT ONSITE FOR INSPECTION		Certificate Expiration Date: <small>(Certificate expires five years after it is issued)</small>	
Service: <input type="checkbox"/> Routine Inspection <input type="checkbox"/> Reinspection <input type="checkbox"/> Complaint <input type="checkbox"/> Construction/Pre-opening <input type="checkbox"/> Other:			
Applicable Law CALIFORNIA RETAIL FOOD CODE ("CalCode"), Beginning with section 113700, California Health and Safety Code (See reverse side of sheet for summary)			

In = In compliance		N/A = Not Applicable		N/O = Not Observed		Maj = Major violation		Out = Items not in compliance		COS = Corrected On Site	
Critical Risk Factors for Disease						Maj	Out	COS			
In							X		24. Person in charge present and performs duties		
In									25. Personal cleanliness and hair restraints		
In	N/O								26. Approved thawing methods used		
In	N/O								27. Food separated and protected		
In	N/O								28. Washing fruits and vegetables		
In									29. Toxic substances properly identified, stored and used		
In	N/A	N/O							30. Food storage, 31. Self service, 32. Labeled		
In	N/A								33. Nonfood contact surfaces clean		
In	N/A	N/O							34. Warewashing facilities maintained, test strips		
In	N/A	N/O							35. Equipment, utensils, approved, clean good repair	X	
In	N/A	N/O							36. Equipment, utensils and linens, storage and use	X	
In	N/A	N/O							37. Vending Machines		
In									38. Adequate ventilation and lighting		
In	N/A	N/O							39. Thermometers provided and accurate		
In	N/A	N/O							40. Wiping cloths properly used and stored		
In	N/A	N/O							41. Plumbing, proper backflow prevention		
In	N/A	N/O							42. Garbage properly disposed; facilities maintained		
In	N/A	N/O							43. Toilet facilities supplied, properly constructed, clean		
In	N/A	N/O							44. Premises clean, vermin proof; personal items separate		
In	N/A	N/O							45. Floors, walls and ceilings maintained and clean		
In									46. No unapproved living or sleeping quarters		
In									47. Signs posted; Permit & inspection report available		
In									48. Plan Review Required		

No PHF []					
°F	Food	Location	°F	Food	Location
39	1/2 & 1/2	3- DOOR TURBO AIR			
29	HARD BOILED EGGS	SINGLE DOMESTIC FRIDGE			
38	HAM	2- DOOR TRUE BACK ROOM			

Comments:

① MAINTAIN EVIDENCE OF FOOD SAFETY (MGR. CERT.) AT THE FACILITY SO THAT IT IS AVAILABLE AT INSPECTION.

③5 REPLACE ALL DOMESTIC APPLIANCES WITH COMMERCIAL U.S.F. APPROVED APPLIANCES IN THE KITCHEN.

③5 RE-FINISH OR REPAINT TOP SHELF IN KITCHEN

③6 INSTALL A EXHAUST HOOD SYSTEM OVER COOKING APPLIANCES IN THE KITCHEN. A PLAN CHECK W/ G.R.E.H IS REQUIRED.

Received By: [Signature] REHS: Andrew A. Perry