

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: <u>CAPAY'S</u>		Inspection Date: <u>10/16/23</u>	
Address: <u>7544 CUTTING AVE.</u>		Reinspection Date (on or after): <u>12/16/23</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>AMANDA METZGAR</u>	Phone No.:	Inspection Time: <u>3:00</u>	Permit Exp. Date:
Certified Food Handler: <u>FRANK NAVEZ</u>		Certificate Expiration Date: <u>4/30/26</u> <small>(Certificate expires five years after it is issued)</small>	
Service: <input checked="" 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									
<input checked="" type="checkbox"/> In													24. Person in charge present and performs duties							
<input checked="" type="checkbox"/> In													25. Personal cleanliness and hair restraints							
<input type="checkbox"/> In	<input checked="" type="checkbox"/> N/O												26. Approved thawing methods used							
<input type="checkbox"/> In	<input checked="" type="checkbox"/> N/O												27. Food separated and protected			<input checked="" type="checkbox"/> X				
<input type="checkbox"/> In	<input checked="" type="checkbox"/> N/O												28. Washing fruits and vegetables							
<input checked="" type="checkbox"/> In													29. Toxic substances properly identified, stored and used							
<input type="checkbox"/> In	<input type="checkbox"/> N/A	<input type="checkbox"/> N/O					<input checked="" type="checkbox"/> X	<input checked="" type="checkbox"/> X					30. Food storage, 31. Self service, 32. Labeled							
<input type="checkbox"/> In	<input checked="" type="checkbox"/> N/A												33. Nonfood contact surfaces clean							
<input checked="" type="checkbox"/> In	<input type="checkbox"/> N/A	<input type="checkbox"/> N/O											34. Warewashing facilities maintained, test strips							
<input type="checkbox"/> In	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> N/O											35. Equipment, utensils, approved, clean good repair			<input checked="" type="checkbox"/> X				
<input type="checkbox"/> In	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> N/O											36. Equipment, utensils and linens, storage and use							
<input type="checkbox"/> In	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> N/O											37. Vending Machines							
<input checked="" type="checkbox"/> In													38. Adequate ventilation and lighting							
<input checked="" type="checkbox"/> In	<input type="checkbox"/> N/A	<input type="checkbox"/> N/O											39. Thermometers provided and accurate							
<input checked="" type="checkbox"/> In													40. Wiping cloths properly used and stored							
<input type="checkbox"/> In	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> N/O											41. Plumbing, proper backflow prevention							
<input type="checkbox"/> In	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> N/O											42. Garbage properly disposed; facilities maintained							
<input type="checkbox"/> In	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> N/O											43. Toilet facilities supplied, properly constructed, clean							
<input type="checkbox"/> In	<input checked="" type="checkbox"/> N/A												44. Premises clean, vermin proof; personal items separate							
<input checked="" type="checkbox"/> In													45. Floors, walls and ceilings maintained and clean			<input checked="" type="checkbox"/> X				
<input checked="" type="checkbox"/> In													46. No unapproved living or sleeping quarters							
<input checked="" type="checkbox"/> In													47. Signs posted; Permit & inspection report available							
<input checked="" type="checkbox"/> In													48. Plan Review Required							

No PHF []					
°F	Food	Location	°F	Food	Location
40	TURKEY MEAT	BACK 2 - DOOR FRIDGE	36	RANCH	ATOP PRETABLE
39	CREAM CHEESE	2 - DOOR BAKING FRIDGE	39	HAMBURGER	2 - DOOR AVANTCO
38	POTATO SALAD	DISPLAY CASE (TRUE)			
54	LASAGNA	LARGE DISPLAY CASE			

Comments:

****CRITICAL VIOLATION****

⑦ HOLD ALL POTENTIALLY HAZARDOUS FOOD AT/BELOW 41°F OR AT/ABOVE 135°F AT ALL TIMES. MEASURED LARGE DISPLAY FRIDGE OUT OF TEMP. DO NOT USE UNTIL REPAIRED. OPERATOR DISPOSED OF APPROX. 2 LB LASAGNA, 2 LBS POTATO SALAD, 1 LB. MAC N' CHEESE, 4 BREAKFAST BURRITOS, 2 PIECES FRIED CHICKEN, 1 PT. MASHED POTATOES, 2 LB BROCCOLI SALAD

Received By: Alexa Barajas-Gama REHS: Andrew Peryo

OFFICIAL INSPECTION REPORT

Continuation Sheet

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Name of Facility / DBA: <u>CARAY'S</u>	Inspection Date: <u>10/16/23</u>
Address: <u>PAGE 2</u>	
Owner/Permitee:	

Comments: VIOLATIONS

27 STORE ALL RAW POTENTIALLY HAZARDOUS FOODS AWAY FROM OR BELOW ANY READY TO EAT FOOD. OBSERVED RAW EGGS ABOVE FROSTING ETC. AND RAW HAMBURGER NEXT TO PRODUCE & COOKED CHICKEN.

35 REPAIR/REPLACE THE BACK GIBSON WHITE CHEST FREEZER.

35 REPAIR THE PREP SINK FIXTURE.

23 MAINTAIN GOOD PEST CONTROL PRACTICES. MANY FLIES WERE OBSERVED AROUND THE FACILITY.

45 CLEAN & SANITIZE ALL THE WALLS & FLOORING. MOST AREAS WERE DIRTY & FILTHY.

45 REPAIR THE SMALL HOLE IN THE CEILING IN THE BACK STORAGE ROOM.

Received By: <u>Roxa Barajas-Garcia</u>	REHS: <u>Andrew A. Pardo</u>
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