

FOOD FACILITY INSPECTION REPORT

GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

247 North Villa Avenue, Willows, CA 95988
Phone (530) 934-6102 FAX (530) 934-6103

Name of Facility/ DBA: <i>Lake Elementary School</i>		Inspection Date: <i>5/10/19</i>	
Address: <i>4672 County Road N, Orland, CA 95963</i>		Reinspection Date (on or after): <i>-</i> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <i>Lake School District</i>	Phone No.: <i>(530) 865-1255</i>	Inspection Time: <i>11:20 am</i>	Permit Exp. Date:
Certified Food Handler: <i>Bobbi Fissari</i>		Certificate Expiration Date: <i>11/14/21</i> <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			Out	COS
<input checked="" type="checkbox"/>		1. Demonstration of knowledge					24. Person in charge present and performs duties			
<input checked="" type="checkbox"/>		2. Communicable disease restrictions					25. Personal cleanliness and hair restraints			
<input checked="" type="checkbox"/>	N/O	3. Discharge of eyes, nose, mouth					26. Approved thawing methods used			
<input checked="" type="checkbox"/>	N/O	4. Eating, tasting, drinking, tobacco use					27. Food separated and protected			
<input checked="" type="checkbox"/>	N/O	5. Hands clean & properly washed, glove use					28. Washing fruits and vegetables			
<input checked="" type="checkbox"/>		6. Handwashing facilities available					29. Toxic substances properly identified, stored and used			
<input checked="" type="checkbox"/>	N/A	N/O	7. Proper hot and cold food holding temps				30. Food storage, 31. Self service, 32. Labeled			
<input checked="" type="checkbox"/>	N/A		8. Time as a public health control, records				33. Nonfood contact surfaces clean			
<input checked="" type="checkbox"/>	N/A	N/O	9. Proper cooling methods				34. Warewashing facilities maintained, test strips			
<input checked="" type="checkbox"/>	N/A	N/O	10. Proper cooking time and temps				35. Equipment, utensils, approved, clean good repair			
<input checked="" type="checkbox"/>	N/A	N/O	11. Reheating temperature for hot holding				36. Equipment, utensils and linens, storage and use			
<input checked="" type="checkbox"/>	N/A	N/O	12. Returned and reservice of food				37. Vending Machines			
<input checked="" type="checkbox"/>			13. Food safe and unadulterated				38. Adequate ventilation and lighting			
<input checked="" type="checkbox"/>	N/A	N/O	14. Food contact surfaces clean and sanitized				39. Thermometers provided and accurate			
<input checked="" type="checkbox"/>			15. Food from approved source				40. Wiping cloths properly used and stored			
<input checked="" type="checkbox"/>	N/A	N/O	16. Shell stock tags, 17. Gulf Oyster regs				41. Plumbing, proper backflow prevention			
<input checked="" type="checkbox"/>	N/A	N/O	18. Compliance with HACCP plan				42. Garbage properly disposed; facilities maintained			
<input checked="" type="checkbox"/>	N/A	N/O	19. Advisory for raw/undercooked food				43. Toilet facilities supplied, properly constructed, clean			
<input checked="" type="checkbox"/>	N/A		20. Health care/ School prohibited food				44. Premises clean, vermin proof; personal items separate			
<input checked="" type="checkbox"/>			21. Hot & cold water. Temp: <i>128</i> °F				45. Floors, walls and ceilings maintained and clean			
<input checked="" type="checkbox"/>			22. Wastewater properly disposed				46. No unapproved living or sleeping quarters			
<input checked="" type="checkbox"/>			23. No rodents, insects, birds, animals				47. Signs posted; Permit & inspection report available			
							48. Plan Review Required			

No PHF []					
°F	Food	Location	°F	Food	Location
<i>37</i>	<i>Milk</i>	<i>Large Milk Coolers</i>	<i>41</i>	<i>Cheese</i>	<i>2 - Dow Coolers</i>
<i>34</i>	<i>Milk</i>	<i>Small Milk Coolers</i>	<i>42</i>	<i>Yogurt mix</i>	<i>1 - Dow Coolers</i>

Comments:

No violations observed! Good job!

Received By: *Bobbi Fissari* REHS: *John H. Wells*