## FOOD FACILITY INSPECTION REPORT GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

225 N. Tehama Street, Willows, CA 95988 Phone (530) 934-6102 FAX (530) 934-6103 Page 1 of

Phone (550) 934-6102 FAX (530) 934-6103									
Name of Facility/ DBA:  Inspection Date:									
HAMILTON VOION HIGH					- Home		E/2=/20		
Address:					CHOOL		5/26/22		
Addre	ess:		£ 1	Phone No.			Rein pection Date (on or after):		
	te il milde	1 37	2 & 45, HAMILTO		) ( ) I = ( )		(Reinspections are subject to fees)		
( ()	( STATE OF	60	- 7 73 MAMICTO	7	1441	CA			
Owner	r/Permitee:			Pl	none No.:/		Inspection Time: Permit	Exp. Date:	
1	10.4	. 1			1.			•	
	AMILTI	DN (	INION TIGH XH	a			11:30		
Certified Food Handler: 14							Certificate Expiration Date:		
							7/22/24		
ARLIE CIVERA							(Certificate explices five years after it is issued)		
Servic	Service: Routine Inspection Reinspection Complaint Construction/Pre-opening Other:								
Applicable Law CALIFORNIA RETAIL FOOD CODE ("CalCode), Beginning with section 113700, California Health and Safety Code (See reverse side of sheet for summary)									
11 , , , , , , , , , , , , , , , , , ,									
	In = In complian	nce N/	A = Not Applicable $N/O = Not Obse$	rved	Maj = Major vi	lation Out = Items	not in compliance COS = Correc	tad On Sita	
	iii iii compila		ritical Risk Factors for Disease			Mation Out - Items	not in compnance COS - Correc		
-				Maj	Out COS			Out COS	
(In)	1. Demonstration of know					24. Person in charge present and performs duties			
(ln)	Communicable disease restrictions		municable disease restrictions				5. Personal cleanliness and hair restraints		
The last	N/O 3. Discharge of eyes, nose, mouth				26. Approved thawing methods used				
N/O 4. Eating, ta			g, tasting, drinking, tobacco use			27. Food separated and protected			
(In)			ds clean & properly washed, glove use			28. Washing fruits and vegetables			
dn			dwashing facilities available			29. Toxic substances properly identified, stored and used			
	N/A N/O								
			roper hot and cold food holding temps			30. Food storage, 31. Self service, 32. Labeled			
(In)	N/A		. Time as a public health control, records			33. Nonfood contact surfaces clean			
In	N/A N/O		roper cooling methods				34. Warewashing facilities maintained, test strips		
(h)	N/A N/O		Proper cooking time and temps			35. Equipment, utensils, approved, clean good repair			
In	N/A N/O	11. Reh	Reheating temperature for hot holding			36. Equipment, utensils and linens, storage and use			
In	N/A N/O		Leturned and reservice of food		"	37. Vending Machines			
			Food safe and unadulterated			38. Adequate ventilation and lighting		1	
The state of the s			Food contact surfaces clean and sanitized			39. Thermometers provided and accurate		+ + -	
1	10/21 10/0							<del>                                     </del>	
	27/0		from approved source			40. Wiping cloths properly used and stored			
	N/O N/O		l stock tags, 17. Gulf Oyster regs				41. Plumbing, proper backflow prevention		
	N/A N/O		pliance with HACCP plan			42. Garbage properly disposed; facilities maintained			
In	N/O	19. Adv	isory for raw/undercooked food			43. Toilet facilities supplied, properly constructed, clean			
h	N/A	20. Heal	th care/ School prohibited food			44. Premises clean, vermin proof; personal items separate			
		21 Hot	& cold water Temp: 70°F			45 Floors walls and	d ceilings maintained and clean		
			& cold water. Temp: 20 °F				d ceilings maintained and clean		
(In)		22. Was	tewater properly disposed			46. No unapproved	living or sleeping quarters		
		22. Was				46. No unapproved 47. Signs posted; Pe	living or sleeping quarters rmit & inspection report available		
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No P		22. Was 23. No r	tewater properly disposed odents, insects, birds, animals			46. No unapproved 47. Signs posted; Pe 48. Plan Review Re	living or sleeping quarters rmit & inspection report available quired		
(In	HF [ ]	22. Was 23. No r	tewater properly disposed odents, insects, birds, animals  Location		°F	46. No unapproved 47. Signs posted; Pe	living or sleeping quarters rmit & inspection report available		
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No P °F 137 29	Food	22. Was 23. No r	Location  WARMING  CABINET  OUTSIDE  WARMIN FRIS  3 - DEOR  TRUE FRIDGE	Depo		46. No unapproved 47. Signs posted; Pe 48. Plan Review Re	living or sleeping quarters rmit & inspection report available quired		
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