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

Name of Facility/ DBA:	Phone (530) 934	-6102	FAX (53	30) 934-6103		
~						Inspection Date:	
Address: Huy 79 & Swiff ST, OFLAND, CA 95963						6/1/23	
Address:					52	Reinspection Date (on or after):	.)
HWY 79 C SWIFF ST. , DRUAND, CA 95963					95963	(Reinspections are subject to fees)	100
Owner Permilee:		Pł	one No	.:		Inspection Time: Permit Ex	cp. Date:
OSE MORAL	EC					11:00	
Certified Food Handler:	7					Certificate Expiration Date:	
OSE MORAL	2					(Certificate expires five years after it is issue	ued)
Service: Routine Inspection	☐ Reinspection ☐ Com					Other:	
Applicable Law CALIFORNIA RETAIL FO	OOD CODE ("CalCode), Beginning wit	h section 1	13700, C	California	Health and Safety Code (See reverse side of sheet for summary)	
In = In compliance $N/A = 1$	Not Applicable N/O = Not Obse	erved	Mai = N	Major vio	olation Out = Item:	s not in compliance COS = Correcte	d On Site
	ll Risk Factors for Disease	Maj	Qut.	COS			Out CO
Program (1)	ation of knowledge		X			e present and performs duties	
	of eyes, nose, mouth	-			26. Approved thaw	ness and hair restraints	
	sting, drinking, tobacco use				27. Food separated		
- Second 1	an & properly washed, glove use				28. Washing fruits a	· ·	
	ning facilities available tand cold food holding temps		X	×		es properly identified, stored and used 1. Self service, 32. Labeled	
	public health control, records		7	1	33. Nonfood contact		
in N/A N/O 9. Proper co	oling methods					cilities maintained, test strips	
	oking time and temps					nsils, approved, clean good repair	
	g temperature for hot holding and reservice of food	-			37. Vending Machi	nsils and linens, storage and use	
13. Food safe	and unadulterated				38. Adequate ventil		
	tact surfaces clean and sanitized					provided and accurate	X
In N/O 16. Shell stoo	n approved source k tags, 17. Gulf Oyster regs	-				g cloths properly used and stored ing, proper backflow prevention	
	ppliance with HACCP plan					rly disposed; facilities maintained	
In N/O 19. Advisory	Advisory for raw/undercooked food					supplied, properly constructed, clean	
	re/ School prohibited food ld water. Temp: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-				vermin proof; personal items separate d ceilings maintained and clean	
1-2-	ter properly disposed					living or sleeping quarters	
	o rodents, insects, birds, animals					Permit & inspection report available	
					48. Plan Review Re	quired	
N. DIEF I 1							
No PHF [] °F Food	Location		o _F		Food	Location	
F Food	Location		F	-	Food	Location	
37 HORCHATA F	DRCHATA MARRI	コミ					
43 CHEESE A	ATOP COOLER						
120 LODICED A	CONCORD LONG S. TARLE						
32 BEEF 2-DOOR EVEREST							
Comments:							
	TONS:						
(6) THE HANDON	ASH SINK SI	HAL	E	SE.	AVAILAS	LE FOR USE	AT
	1 OPETA VIED	INT	ENS	كااك	BEING	STORED IN	SINK
	- U.SSEIEV FRO	0 7					
ALL TIMES,			180	474	ARDOUS	FOOD AT BEL	
ALL TIMES,	POTENTIAL	Ly	41			. /	ow
ALL TIMES,	POTENTIAL BOYE 135°F	AT	HA	-	TIMES.	FOOD AT BELL	PS
ALL TIMES,	POTENTIAL BOYE 135°F	AT	HA	-	TIMES.	FOOD AT BEL	PS

OFFICIAL INSPECTION REPORT

Continuation Sheet

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Name of Facility / DBA: Inspection Date:
to Courte of France
EL GRULLENSE FOODS 6/123
Owner/Permitee:
Comments: VIOLATIONS (CONT.)
39 PROVIDE A PROBE THERMOMETER AVAILABLE FOR
USE INSIDE THE FOOD TRUCK.
DAN EMPLOYEES THAT HANDLE FOOD MUST HAVE
A FOOD SAFETY HANDLER CARD. YEEP PROOF ON
SAFETY CERT AT THE TRUCK.
Received By: REHS: TOREW FRYS