

**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: <i>Lake Elementary School</i>		Inspection Date: <i>9/9/22</i>	
Address: <i>4572 County Road N, Orland, CA 95963</i>		Reinspection Date (on or after): <i>Next Inspection</i> <small>(Reinspections are subject to fees)</small>	
Owner/Permitee: <i>Lake Unified School District</i>	Phone No.:	Inspection Time: <i>11:30 am</i>	Permit Exp. Date:
Certified Food Handler: <i>Niana Cooper</i>		Certificate Expiration Date: <i>2/3/27</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"/>									24. Person in charge present and performs duties		
<input checked="" type="checkbox"/>									25. Personal cleanliness and hair restraints		
<input checked="" type="checkbox"/>	N/O								26. Approved thawing methods used		
<input checked="" type="checkbox"/>	N/O								27. Food separated and protected		
<input checked="" type="checkbox"/>	N/O								28. Washing fruits and vegetables		
<input checked="" type="checkbox"/>									29. Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/>	N/A	N/O							30. Food storage, 31. Self service, 32. Labeled		
<input checked="" type="checkbox"/>	N/A								33. Nonfood contact surfaces clean		
<input checked="" type="checkbox"/>	N/A	<input checked="" type="checkbox"/>	N/O						34. Warewashing facilities maintained, test strips		
<input checked="" type="checkbox"/>	N/A	<input checked="" type="checkbox"/>	N/O						35. Equipment, utensils, approved, clean good repair		
<input checked="" type="checkbox"/>	N/A	<input checked="" type="checkbox"/>	N/O						36. Equipment, utensils and linens, storage and use		
<input checked="" type="checkbox"/>	N/A	<input checked="" type="checkbox"/>	N/O						37. Vending Machines		
<input checked="" type="checkbox"/>									38. Adequate ventilation and lighting		X
<input checked="" type="checkbox"/>	N/A	N/O							39. Thermometers provided and accurate		
<input checked="" type="checkbox"/>									40. Wiping cloths properly used and stored		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	N/O							41. Plumbing, proper backflow prevention		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	N/O							42. Garbage properly disposed; facilities maintained		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	N/O							43. Toilet facilities supplied, properly constructed, clean		
<input checked="" type="checkbox"/>	N/A								44. Premises clean, vermin proof; personal items separate		
<input checked="" type="checkbox"/>									45. Floors, walls and ceilings maintained and clean		
<input checked="" type="checkbox"/>									46. No unapproved living or sleeping quarters		
<input checked="" type="checkbox"/>									47. Signs posted; Permit & inspection report available		
<input checked="" type="checkbox"/>									48. Plan Review Required		

No PHF [ ]					
°F	Food	Location	°F	Food	Location
136	Pizza	Creslar Warmer	41	Yogurt	Walk-in cooler
40	Shredded Pork	2-Door-Tone Coolers	41	Milk	Milk cooler

Comments:

*3) Repair inoperable light in walk-in freezer*

Received By: <i>X Della Fussi</i>	REHS: <i>John H. Wells</i>
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