

FOOD FACILITY INSPECTION REPORT
GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

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

Name of Facility/ DBA: Buds AM/PM Mini Mart		Inspection Date: 12/3/14	
Address: 1399 W. WOOD ST., 1399 Willows, CA		Reinspection Date (on or after): 1/3/15 <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: RUSSELL M. MORGAN INC.	Phone No.:	Inspection Time: 2:30	Permit Exp. Date:
Certified Food Handler: RUSSELL MORGAN		Certificate Expiration Date: 11/20/15 <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 <i>CALIFORNIA RETAIL FOOD CODE ("CalCode), Beginning with section 113700, California Health and Safety Code (See reverse side of sheet for summary)</i>			

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"/> In						24. Person in charge present and performs duties		
<input checked="" type="checkbox"/> In						25. Personal cleanliness and hair restraints		
<input checked="" type="checkbox"/> In		<input type="checkbox"/> N/O				26. Approved thawing methods used		
<input checked="" type="checkbox"/> In		<input type="checkbox"/> N/O				27. Food separated and protected		
<input checked="" type="checkbox"/> In		<input type="checkbox"/> N/O				28. Washing fruits and vegetables		
<input checked="" type="checkbox"/> In						29. Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/> In	<input type="checkbox"/> N/A	<input type="checkbox"/> N/O				30. Food storage, 31. Self service, 32. Labeled		
<input checked="" type="checkbox"/> In	<input 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 checked="" type="checkbox"/> In	<input type="checkbox"/> N/A	<input type="checkbox"/> N/O				35. Equipment, utensils, approved, clean good repair		
<input checked="" type="checkbox"/> In	<input type="checkbox"/> N/A	<input type="checkbox"/> N/O				36. Equipment, utensils and linens, storage and use		
<input checked="" type="checkbox"/> In	<input type="checkbox"/> N/A	<input 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	<input type="checkbox"/> N/A	<input type="checkbox"/> N/O				40. Wiping cloths properly used and stored		
<input checked="" type="checkbox"/> In	<input type="checkbox"/> N/A	<input type="checkbox"/> N/O				41. Plumbing, proper backflow prevention	<input checked="" type="checkbox"/> X	
<input checked="" type="checkbox"/> In	<input type="checkbox"/> N/A	<input type="checkbox"/> N/O				42. Garbage properly disposed; facilities maintained		
<input checked="" type="checkbox"/> In	<input type="checkbox"/> N/A	<input type="checkbox"/> N/O				43. Toilet facilities supplied, properly constructed, clean		
<input checked="" type="checkbox"/> In	<input type="checkbox"/> N/A					44. Premises clean, vermin proof; personal items separate		
<input checked="" type="checkbox"/> In				<input checked="" type="checkbox"/> X		45. Floors, walls and ceilings maintained and clean		
<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	<input checked="" type="checkbox"/> X	

No PHF []					
°F	Food	Location	°F	Food	Location
40	CHICKEN SALAD SAND.	2-DOOR DISPLAY FRIDGE			
41	MILK	DISPLAY FRIDGE			
165	HAMBURGER	HOT HOLDING DISPLAY CASE			
40	Hot Dog	WALK-IN			

Comments:
VIOLATIONS:

(18) EXHAUST HOOD INSIDE FACILITY KITCHEN & OVEN ARE STILL NOT APPROVED BY G.C.E.H. MORE INFORMATION WAS REQUESTED ON LETTER DATED 3/20/14. MUST HAVE DEPT. APPROVAL BY RE-INSPECTION DATE

(41) REPAIR HAND WASH SINK HOT WATER HANDLE.

(41) PROVIDE A VACUUM BREAKER OR OTHER METHOD OF BACKFLOW PREVENTION ON/AT THE MOP SINK, SINK MEASURED

(21) PROVIDE HOT WATER OF AT LEAST 120°F AT 3-COMP SINK. 109°F.

Received By: Jessica [Signature] REHS: Andrew [Signature]