

**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: <u>LA PERLA DEL PACIFICO</u>		Inspection Date: <u>9/11/17</u>	
Address: <u>595 LOS ROBLES AVE, HAMILTON CITY</u>		Reinspection Date (on or after): <u>NEXT INSPECTION</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>ALEJANDRO ORTIZ</u>	Phone No.: <u>826-3644</u>	Inspection Time: <u>3:30</u>	Permit Exp. Date: <u>-</u>
Certified Food Handler: <u>ALEJANDRO ORTIZ</u>		Certificate Expiration Date: <u>9/14/20</u> <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			
In							X		24. Person in charge present and performs duties		
In									25. Personal cleanliness and hair restraints		
In		N/O							26. Approved thawing methods used		
In		N/O							27. Food separated and protected		X
In		N/O							28. Washing fruits and vegetables		
In									29. Toxic substances properly identified, stored and used		
In	N/A	N/O							30. Food storage, 31. Self service, 32. Labeled		X
In	N/A								33. Nonfood contact surfaces clean		
In	N/A	N/O							34. Warewashing facilities maintained, test strips		
In	N/A	N/O							35. Equipment, utensils, approved, clean good repair		X
In	N/A	N/O							36. Equipment, utensils and linens, storage and use		X
In	N/A	N/O							37. Vending Machines		
In									38. Adequate ventilation and lighting		
In	N/A	N/O							39. Thermometers provided and accurate		
In									40. Wiping cloths properly used and stored		
In	N/A	N/O					X		41. Plumbing, proper backflow prevention		
In	N/A	N/O							42. Garbage properly disposed; facilities maintained		
In	N/A	N/O							43. Toilet facilities supplied, properly constructed, clean		
In	N/A								44. Premises clean, vermin proof; personal items separate		
In									45. Floors, walls and ceilings maintained and clean		X
In									46. No unapproved living or sleeping quarters		
In									47. Signs posted: Permit & inspection report available		
									48. Plan Review Required		

No PHF [ ]					
°F	Food	Location	°F	Food	Location
35	RAW CLAMS	ATOP PREP COOLER	40	CIVICHE	REACH-IN 2-DOOR TRUE FRIDGE
137	RICE	ATOP STEAM TABLE			
39	COOKED SHRIMP	ATOP LONG TRUE PREP COOLER			
35	RAW BEEF	WALK-IN FRIDGE			

Comments:  
- NO CRITICAL VIOLATIONS

OTHER VIOLATIONS

① MAINTAIN EVIDENCE OF EMPLOYEE FOOD HANDLER CARDS. ONE EMPLOYEE WAS MISSING A CERT. FOOD HANDLER CARD.

①⑥ ALL RAW SHELL OYSER STOCK TAGS MUST BE KEPT WITH THE HARVESTED OYSTERS WHEN IN STORAGE. ~ OBSERVED 2 BUCKETS OF RAW SHELL OYSER WITHOUT STOCK TAGS

Received By: Abigail Ortiz REHS: Andrew Perry

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Continuation Sheet

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Comments:

OTHER VIOLATIONS (CONT.)

- 27) STORE ALL RAW POTENTIALLY HAZARDOUS FOOD ~~AWAY~~ AWAY FROM OR BELOW READY TO EAT FOOD. ~ OBSERVED RAW EGG ABOVE CONDIMENT/ BEANS ETC. IN THE WALK-IN.
- 30) STORE ALL FOOD AT LEAST 6 INCHES OF THE FLOOR. ~ OBSERVED BUCKETS OF FOOD ON WALK-IN FLOOR.
- 32) LABEL ALL BULK FOOD STORAGE BINS THAT CONTAIN FOODS THAT ARE NOT EASILY RECOGNIZABLE.
- 35) USE ONLY COMMERCIAL GRADE, N.S.F., & HEALTH DEPT. APPROVED APPLIANCES IN THE FOOD FACILITY. (OSTER HOUSEHOLD BLENDER)
- 36) USE ONLY SCOOPS WITH HANDLES THAT ARE NON-ABSORBANT, DURABLE & EASILY CLEANABLE FOR SCOOPING DRIED GOODS. ~ OBSERVED BOWLS & PLASTIC CUPS IN STORAGE BINS.
- 45) CLEAN/SANITIZE & REPAIR ALL THE FLOORING COVING, WALLS, FLOORS & CEILING IN THE KITCHEN AREAS.
- 45) CLEAN & SEAL ALL VINYL COVING SO THAT IT IS ATTACHED FIRMLY TO THE WALL.

Received By:

Abigail Ortiz

REHS:

Andrew P. [Signature]