

**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:<br><u>4th St. Cafe</u>  |                               | Inspection Date:<br><u>4/11/18</u>  |
| Address:<br><u>824 Fourth St, Orland CA 95953</u>  |                               | Reinspection Date (on or after):<br><u>4/18/18</u><br><small>(Reinspections are subject to fees)</small>  |
| Owner/Permitee:<br><u>Julie Van Tol</u>  | Phone No.:<br><u>988-9030</u> | Inspection Time:<br><u>10:00am</u>  |
| Certified Food Handler:<br><u>Julie Van Tol (+ 2 others)</u>   |                               | Permit Exp. Date:<br><u>3/29/19</u><br><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 <u>CALIFORNIA RETAIL FOOD CODE ("CalCode), Beginning with section 113700, California Health and Safety Code</u> (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                                |     |                      |  |                    |  |                       |     |                               | 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                            |                         |   |
| In                                | N/O |                      |  |                    |  |                       |     |                               | 28. Washing fruits and vegetables                           |                         |   |
| In                                |     |                      |  |                    |  |                       |     |                               | 29. Toxic substances properly identified, stored and used   | X                       | X |
| In                                | N/A | N/O                  |  |                    |  | X                     | X   | X                             | 30. Food storage, 31. Self service, 32. Labeled             |                         |   |
| 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                       | X                       |   |
| In                                | N/A | N/O                  |  |                    |  |                       |     |                               | 39. Thermometers provided and accurate                      |                         |   |
| In                                |     |                      |  |                    |  |                       |     |                               | 40. Wiping cloths properly used and stored                  |                         |   |
| In                                | N/A | N/O                  |  |                    |  |                       |     |                               | 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                                | N/A |                      |  |                    |  |                       |     |                               | 45. Floors, walls and ceilings maintained and clean         |                         |   |
| In                                |     |                      |  |                    |  |                       | X   |                               | 46. No unapproved living or sleeping quarters               |                         |   |
| In                                |     |                      |  |                    |  |                       |     |                               | 47. Signs posted; Permit & inspection report available      |                         |   |
| In                                |     |                      |  |                    |  |                       |     |                               | 48. Plan Review Required                                    |                         |   |

**No PHF [ ]**

| °F  | Food             | Location                                | °F                         | Food                      | Location                      |
|---|------------------|---|----------------------------|---------------------------|-------------------------------|
| 123   | Sausage<br>Gravy | 3-Bed warmer<br>in Cooks' Station       | 42                         | Taco soup                 | Bottom of left Prep<br>Cooler |
| 139   | Sausage          | " "                                     | 41                         | cream<br>cheese           | Top of Right Prep<br>Cooler   |
| 143   | chicken<br>gravy | " "                                     | 44                         | Bacon                     | 2-Door Everest<br>Cooler      |
| 127   | chicken<br>gravy | cooling at room temp<br>with Ice Paddle | 42                         | cut<br>potatoes           | " "                           |
| Comments:   |                  |   | 154                        | cream or<br>mushroom soup | Soup well                     |
| 1) Critical Violation<br>Hold potentially hazardous foods at/above 135°F or at/below 41°F.<br>Measured:<br>a) Sausage Gravy at 123°F in 3-Bed warmer (disposed of 1/2 lb)<br>b) Bacon at 44°F in 2-Door Everest Cooler. |                  |   |                            |                           |                               |
| Other Violations  |                  |   |                            |                           |                               |
| 2) Provide warm water of 100-108°F at kitchen handwash sink.<br>Measured 111°F.   |                  |   |                            |                           |                               |
| Received By: <u>x Julie Van Tol</u>   |                  |   | REHS: <u>John H. Wells</u> |                           |                               |

**FOOD FACILITY INSPECTION REPORT**  
**Continuation Sheet**  
**GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT**  
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|   |                                    |
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| Address:<br><u>824 Fourth St, Orland, CA 95963</u>  |                                    |
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Comments:

Other Violations

29) Store cleaning chemicals away from food items. Observed cleaning solution spray bottles adjacent to potatoes (immediately abated)

35) Replace crack lids to sugar bulk bins.

36) Remove duct tape from handle of ice paddle.

38) clean lint from ceiling return air registers in kitchen.

38b) Replace missing ventilation hood filter.

|                                   |                            |
|-----------------------------------|----------------------------|
| Received By: <u>Julie van Tol</u> | REHS: <u>John H. Wells</u> |
|-----------------------------------|----------------------------|