

FOOD FACILITY INSPECTION REPORT
GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

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

Page 1 of 2

Name of Facility/ DBA: LA PERLA DEL PACIFICO		Inspection Date: 6/18/18	
Address: 595 LOS POBLES AVE, HAMILTON CITY		Reinspection Date (on or after): * FACILITY CLOSED UNTIL FEES PAID <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: ALEJANDRO ORTIZ	Phone No.: 826-3644	Inspection Time: 4:00	Permit Exp. Date:
Certified Food Handler: ALEJANDRO ORTIZ		Certificate Expiration Date: 4/4/20 <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"/>	In		1. Demonstration of knowledge				24. Person in charge present and performs duties			
<input checked="" type="checkbox"/>	In		2. Communicable disease restrictions				25. Personal cleanliness and hair restraints			
<input checked="" type="checkbox"/>	In	N/O	3. Discharge of eyes, nose, mouth				26. Approved thawing methods used			
<input checked="" type="checkbox"/>	In	N/O	4. Eating, tasting, drinking, tobacco use				27. Food separated and protected		X	
<input checked="" type="checkbox"/>	In	N/O	5. Hands clean & properly washed, glove use				28. Washing fruits and vegetables			
<input checked="" type="checkbox"/>	In		6. Handwashing facilities available			Maj	29. Toxic substances properly identified, stored and used			
<input checked="" type="checkbox"/>	In	N/A N/O	7. Proper hot and cold food holding temps				30. Food storage. 31. Self service, 32. Labeled		X	
<input checked="" type="checkbox"/>	In	N/A	8. Time as a public health control, records				33. Nonfood contact surfaces clean			
<input checked="" type="checkbox"/>	In	N/A N/O	9. Proper cooling methods			X	34. Warewashing facilities maintained, test strips			
<input checked="" type="checkbox"/>	In	N/A N/O	10. Proper cooking time and temps				35. Equipment, utensils, approved, clean good repair		X	
<input checked="" type="checkbox"/>	In	N/A N/O	11. Reheating temperature for hot holding				36. Equipment, utensils and linens, storage and use			
<input checked="" type="checkbox"/>	In	N/A N/O	12. Returned and reserve of food				37. Vending Machines			
<input checked="" type="checkbox"/>	In		13. Food safe and unadulterated				38. Adequate ventilation and lighting		X	
<input checked="" type="checkbox"/>	In	N/A N/O	14. Food contact surfaces clean and sanitized				39. Thermometers provided and accurate			
<input checked="" type="checkbox"/>	In		15. Food from approved source				40. Wiping cloths properly used and stored		X	
<input checked="" type="checkbox"/>	In	N/A N/O	16. Shell stock tags, 17. Gulf Oyster regs				41. Plumbing, proper backflow prevention		X	
<input checked="" type="checkbox"/>	In	N/A N/O	18. Compliance with HACCP plan				42. Garbage properly disposed; facilities maintained			
<input checked="" type="checkbox"/>	In	N/A N/O	19. Advisory for raw/undercooked food				43. Toilet facilities supplied, properly constructed, clean			
<input checked="" type="checkbox"/>	In	N/A	20. Health care/ School prohibited food				44. Premises clean, vermin proof; personal items separate			
<input checked="" type="checkbox"/>	In		21. Hot & cold water. Temp: _____ °F				45. Floors, walls and ceilings maintained and clean			
<input checked="" type="checkbox"/>	In		22. Wastewater properly disposed				46. No unapproved living or sleeping quarters			
<input checked="" type="checkbox"/>	In		23. No rodents, insects, birds, animals				47. Signs posted; Permit & inspection report available			
							48. Plan Review Required			

No PHF []					
°F	Food	Location	°F	Food	Location
39	CEVICHE	2-DOOR TRUE FRIDGE	39	BEEF	WALK-IN FRIDGE
38	HORUHATA	2-DOOR TRUE FRIDGE	33	OYSTERS	3-DOOR TRANSLON
40	OYSTERS	TOP PREP COOLER			
136	ARROZ	NEMCO WARMER			

Comments:
- NO CRITICAL VIOLATIONS

OTHER VIOLATIONS

⑨ **COOL ALL POTENTIALLY HAZARDOUS FOOD IN SHALLOW METAL CONTAINERS OR USING AN ICE PADDLE OR SMALL PORTION SIZES. OBSERVED CHICKEN SOUP BASE COOLING IN WALK-IN.**

②⑦ **STORE ALL RAW POTENTIALLY HAZARDOUS FOOD BELOW OR**

Received By: Alejandro Ortiz REHS: Andrew Pardo

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Continuation Sheet

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Comments:

OTHER VIOLATIONS

27) AWAY FROM READY TO EAT FOODS. 2 OBSERVED RAW SHRIMP ABOVE VEGIS.

30) STORE ALL FOOD AT LEAST 6 INCHES OFF OF THE FLOOR. 2 OBSERVED SACKS OF SALT/ETC. ON FLOOR IN STORAGE ROOM.

35) DISCONTINUE USING PLASTIC/STYROFOAM SCOOPS AS BULK FOOD SCOOPERS. ONLY USE SCOOPS W/ HANDLES.

38) CLEAN/SANITIZE THE FOLLOWING APPLIANCES.

- 1) CHEST COOLER IN BACK STORAGE ROOM
- 2) 3- DOOR TRAWLSON (SEA FOOD)

38) PROVIDE LIGHT SHIELDS OR SHATTER PROOF BULBS OVER KITCHEN LIGHTS.

40) STORE ALL WIPING RAGS IN BUCKET OF SANITIZER WHEN NOT IN USE.

41) REPAIR LEAKY FIXTURE ON KITCHEN HAND WASH SINK.

NOTE: FACILITY IS CLOSED ON THE ABOVE DATE AND TIME FOR PERMIT EXPIRATION.

Received By:

Alvin Oute

REHS:

ANDREW P. RYGO