

County of Tehama  
Department of Environmental Health  
633 Washington St., Rm 36  
Red Bluff CA 96080  
Phone # (530) 527-8020  
www.co.tehama.ca.us

## OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

Facility Name	: ENJOY THE STORE	Owner	: BRANDON GRISSOM
Site Address	: 615 MAIN ST	Owner Address	: 615 MAIN ST
Facility ID	: FA0001198	Inspector	: EE0000005 - Tia Branton
Record ID	: PR0002080	Inspector Phone	: (530) 527-8020
License/Permit Number	: PT0002170	Program:	: 1617 - Retail Market <6000 Sq Feet
Person in Charge	:		: 1 Prep Area
Inspection Date	: 3/10/2015	Total Inspection Time	: 45 min.
Inspection Number	: DA0001878	Result	: 01 - Meets Standards
Purpose of Inspection	: 102 - Routine Inspection		

An inspection of your property revealed the following violations. Please note the date for reinspection. Thank you for your cooperation.

### Inspection Violations

#### DEDICATED WORKING THERMOMETER SHALL BE AVAILABLE AT ALL TIMES - 16 39

Comply by 3/11/2015

Not In Compliance

*Violation Description:*

An accurate easily readable metal probe thermometer suitable for measuring temperature of food shall be available to the food handler. A thermometer +/- 2 °F shall be provided for each hot and cold holding unit of potentially hazardous foods and high temperature warewashing machines. (114157, 114159)

*Corrective Description:*

*Inspector Comments:*

All refrigeration units shall hold below 41 degrees F.

#### ALL FOOD SHALL COME FROM APPROVED SOURCE - 16 15

Comply by 3/11/2015

Not In Compliance

*Violation Description:*

All food shall be obtained from an approved source. (113980, 113982, 114021-114031, 114041)

*Corrective Description:*

*Inspector Comments:*

Please confirm all foods are from approved source (Cottage food approved if necessary).

#### WAREWASHING FACILITIES SHALL BE WORKING CORRECTLY AND HAVE TESTING MATERIALS TO VERIFY CHEMICAL CONC - 16 34

Comply by 3/31/2015

Not In Compliance

*Violation Description:*

Food facilities that prepare food shall be equipped with warewashing facilities. Testing equipment and materials shall be provided to measure the applicable sanitization method. (114067(f,g), 114099, 114099.3, 114099.5, 114101(a), 114101.1, 114101.2, 114103, 114107, 114125)

*Corrective Description:*

*Inspector Comments:*

Please provide test strips to verify disinfection residual on sanitizing dishwasher.

### Overall Inspection Comments

Facility very clean.

Received By:

Date

Tia Branton

Date