OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | 2 BUDS 592 ANTELOPE BLVD | Owner | : STEVEN JOINER : 23422 VOLCANO RD | |
|-----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|---------------------------------------|-------------------|
| Sile Address | | Owner Address | · 23422 VOLCANO RD | |
| Facility ID | : FA0000635 | Inspector | : EE0000017 - Jana Go | osselin |
| Record ID | : PR0000271 | Inspector Phone | : Not Specified | |
| License/Permit Number | : PT0002853 | Program: | : 1623 - Restaurant <2 | 2000 Sq. Feet |
| Person in Charge | : | | : | |
| Inspection Date | : 11/16/2020 | Total Inspection Time | : 45 min. | |
| Inspection Number | DA0008368 | Desult | · 03 - Minor Violations | |
| Purpose of Inspection | : 102 - Routine Inspection | Result | | |
| An inspe | ction of your property revealed the following v | violations. Please note the date for reins | spection. Thank you for your co | ooperation. |
| Inspection Violation | ons | | | |
| ALL FOOD CONTAC | T SURFACES SHALL BE KEPT CLEANED A | ND SANITIZED - 16 14 | "Comply by Date" Not Specified | Not In Compliance |
| Violation Description | n: | | | |
| | surfaces of utensils and equipment shall be cl 14109, 114111, 114113, 114115 (a, b, d), 114 | | 114099.1, 114099.4, 114099.6 | s, 114101 |
| Corrective Descript | ion: | | | |
| Inspector Comment Soda nozzles dir | 's: ty. Please increase soda nozzle cleaning prot | tocol schedule so that nozzles are clean | ed and sanitized more frequent | tly. |
| ALL VENTILATION S | HALL MEET REQUIREMENTS - 16 38B | | "Comply by Date" Not Specified | Not In Compliance |
| Violation Description | n: | | | |
| Exhaust hoods s | hall be provided to remove toxic gases, heat. | grease, vapors and smoke and be appr | oved by the local building depa | rtment. |
| Canopy-type hoo Toilet rooms sha | ods shall extend 6# beyond all cooking equipr Il be vented to the outside air by a screened o g codes. (114149, 114149.1) | nent. All areas shall have sufficient vent | ilation to facilitate proper food s | torage. |
| Corrective Descript | ion: | | | |
| Inspector Comment Hood system ne | ts: eds fire inspection and cleaning. | | | |
| | CILITIES SHALL BE WORKING CORRECTLY IFY CHEMICAL CONC - 16 34 | AND HAVE TESTING | "Comply by Date" Not Specified | Not In Compliance |
| Violation Description | n: | | | |
| | at prepare food shall be equipped with warew anitization method. (114067(f,g), 114099, 114 | | | |
| Corrective Descript | ion: | | | |
| Inspector Comment | ʻs: | | | |
| - | eeds test strips to ensure adequate sanitizer o also has a leak that needs to be fixed. | concentration. Please train staff on how | to sanitize dishes and make su | re it is |
| Overall Inspection Co Sealed floor in kitchen I | omments ooks great! Thank you for continued improve | ments. | | |

Jule & Sof.

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : ABBY'S BAKERY : 7889 HIGHWAY 99 E | | MAYRA AND ISRAEL MADRIGAL 7889 E HWY 99E |
|-----------------------------------------------------------------------|--------------------------------------------|-------------------------|------------------------------------------------------------|
| Facility ID Record ID License/Permit Number Person in Charge | : FA0000575 : PR0000193 : 2165-16F-1 | Inspector Phone : | EE0000005 - Tia Branton (530) 527-8020 1610 - Bakery |
| Inspection Date | : 11/12/2020 | Total Inspection Time : | 60 min. |
| Inspection Number Purpose of Inspection | : DA0008361 : 102 - Routine Inspection | Result : | 00 - Not Applicable |
| | | | |

Inspection Violations

No violations cited.

—Overall Inspection Comments

Inspection by Tim Potanovic: Past violations corrected. Please contact our office before expanding meat counter as discussed.

Branton

Received By:

Date

Tia Branton

Date

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : ALCATRAZ RESTAURANT AND TAQUERIA : 343 S MAIN ST | Owner Owner Address | : ADELAIDA SOTELO AND JUAN GABRIEL SANT : 5180 LUNING AVE |
|-----------------------------------------------------------------------|-----------------------------------------------------------|------------------------------------------|------------------------------------------------------------------------------------------------|
| Facility ID Record ID License/Permit Number Person in Charge | : FA0000106 : PR0002587 : PT0002797 | Inspector Inspector Phone Program: | EE0000017 - Jana Gosselin Not Specified 1624 - Restaurant 2000 Sq. Feet-6000 Sq. Feet |
| Inspection Date Inspection Number Purpose of Inspection | : 11/10/2020 : DA0008358 : 102 - Routine Inspection | Total Inspection Time Result | : 30 min. : 01 - Meets Standards |

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

Inspection Violations

ALL FOOD CONTACT SURFACES SHALL BE KEPT CLEANED AND SANITIZED - 16 14

Violation Description:

All food contact surfaces of utensils and equipment shall be clean and sanitized. (113984(e), 114097, 114099.1, 114099.4, 114099.6, 114101 (b-d), 114105, 114109, 114111, 114113, 114115 (a, b, d), 114117, 114125(b), 114141)

Corrective Description:

Inspector Comments:

Please increase frequency of soda nozzle cleaning and sanitization.

-Overall Inspection Comments

Additionally, please cover food in walk-in as soon as it is cool enough to cover. Everything looks good, thank you!

Received By:

Date

Jana Gosselin

Date

Not In Compliance

"Comply by Date" Not

Specified

Jule & Sof.

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name | : ARCO AM/PM | Owner | : JOHN JOHAL | |
|----------------------------------------------------------|----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|---------------------|
| Site Address | : 1080 S MAIN St | Owner Address | 1308 KANSAS AVE | |
| Facility ID | : FA0000986 | Inspector | : EE0000017 - Jana G | osselin |
| Record ID | : PR0001231 | Inspector Phone | : Not Specified | |
| License/Permit Number | : 7070-16F-1 | Program: | : 1617 - Retail Market | <6000 Sq Feet |
| Person in Charge | : | | : 1 Prep Area | |
| Inspection Date | : 11/2/2020 | Total Inspection Time | : 45 min. | |
| Inspection Number | : DA0008339 | Result | : 03 - Minor Violations | |
| Purpose of Inspection | : 102 - Routine Inspection | | | |
| An inspe | ection of your property revealed the follo | owing violations. Please note the date for reir | nspection. Thank you for your c | ooperation. |
| Inspection Violation | ons | | | |
| | | | | |
| ALL FOOD CONTAC | T SURFACES SHALL BE KEPT CLEA | NED AND SANITIZED - 16 14 | "Comply by Date" Not Specified | Not In Compliance |
| Violation Descriptio | n: | | oposition | |
| All food contact | | ll be clean and sanitized. (113984(e), 114097 | 7, 114099.1, 114099.4, 114099.6 | 6, 114101 |
| Corrective Descript | | u), 114117, 114125(b), 114141) | | |
| | | | | |
| Inspector Commen | | | | |
| Soda nozzles ve more frequent cl | | y and on a regular schedule from here forward | d. Likewise, freeze machine tray | needs |
| ALL FOOD SHALL B | E LABELED CORRECTLY - 16 32 | | "Comply by Date" Not Specified | Not In Compliance |
| Violation Descriptio | n: | | | |
| - | - | ling, if it is offered for sale under the name of tity has been established by regulation. (1140 | | |
| Corrective Descript | ion: | | | |
| Inspector Commen Please make su | ts: re baked goods in enclosed cabinet are | labeled. | | |
| HANDWASHING ANI - 16 47 | D TOILET FACILITIES MUST BE AVAIL | ABLE WITH CORRECT SIGNAGE | "Comply by Date" Not Specified | Not In Compliance |
| Violation Descriptio | n: | | | |
| (113953.5) (b) N Consumers shal food facility cons | lo smoking signs shall be posted in food I be notified that clean tableware is to b | directing attention to the need to thoroughly of d preparation, food storage, warewashing, an we used when they return to self-service areas public toilet facilities, shall prominently post a 5.1, 114381 (e)). | d utensil storage areas (113978 s such as salad bars and buffets |). (c) . (d) Any |
| Corrective Descript | ion: | | | |
| Inspector Commen | ts: | | | |

Employee restrooms need signage stating that employees must wash their hands before returning to work.

Overall Inspection Comments

Please work on cleaning up and removing excess clutter and debris from back area. Thank you!

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

Facility Name Site Address : ARCO AM/PM : 1080 S MAIN St

Owner Owner Address : JOHN JOHAL : 1308 KANSAS AVE

Jula & Sof.

Received By:

Date

Jana Gosselin

Date

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : BERRENDOS SCHOOL : 401 CHESTNUT AVE | Owner Owner Address | : BERRENDOS SCHOOL : 401 CHESTNUT AVE |
|-------------------------------|------------------------------------------|------------------------|------------------------------------------|
| Facility ID | : FA0000497 | Inspector | EE0000017 - Jana Gosselin |
| Record ID | : PR0000102 | Inspector Phone | : Not Specified |
| License/Permit Number | : 2019-16F-1 | Program: | : 1635 - School Cafeteria/Senior |
| Person in Charge | : | | : Program |
| Inspection Date | : 11/3/2020 | Total Inspection Time | : 30 min. |
| Inspection Number | : DA0008348 | | · 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | - 01 - Meets Standards |

Overall Inspection Comments Kitchen looks great, thank you!

Received By:

Date

Jula & Sof.

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : THE CABIN SALOON, LLC : 8057 HIGHWAY 99 E | Owner Owner Address | : CANDI FLEMING : 4 SIR ANDREW CT |
|--------------------------------------------|------------------------------------------------|------------------------------|-----------------------------------------------|
| Facility ID Record ID | : FA0000560 : PR0000174 | Inspector Inspector Phone | : EE0000005 - Tia Branton : (530) 527-8020 |
| License/Permit Number | 2144-16F-1 | Program: | : 1626 - Bar Prepackaged Foods Only |
| Person in Charge | : | | : |
| Inspection Date | : 11/16/2020 | Total Inspection Time | : 60 min. |
| Inspection Number Purpose of Inspection | : DA0008366 : 106 - Pre-Opening Inspection | Result | : 01 - Meets Standards |
| — Inspection Violati | ons | | |

No violations cited.

—Overall Inspection Comments

Facility looks great. Okay to open.

Received By:

Date

Tia Branton

2. Branton

Date

OFFICIAL FOOD INSPECTION REPORT



Not In Compliance

Not In Compliance

Tim Potanovic, REHS - Director

| Facility Name Site Address Facility ID Record ID License/Permit Number Person in Charge Inspection Date Inspection Number | CARLITO'S MEXICAN RESTAURANT 480 ANTELOPE BLVD FA0000540 PR0000153 2106-16F-1 11/2/2020 DA0008341 | Owner Owner Address Inspector Inspector Phone Program: Total Inspection Time Result | JORGE HERNANDEZ 5045 DEBBIE LN EE0000017 - Jana Gos Not Specified 1624 - Restaurant 200 Feet-6000 Sq. Feet 45 min. 04 - Major Violations | sselin | |
|------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--|
| Purpose of Inspection | : 102 - Routine Inspection | Hoodit | , | | |
| An inspection of your property revealed the following violations. Please note the date for reinspection. Thank you for your cooperation. | | | | | |
| — Inspection Violation | ons | | | | |
| HAND WASHING FA | CILITIES REQUIRED - 16 6 | | Comply by 12/2/2020 | Not In Compliance | |
| Violation Descriptio | n: | | | | |
| • | pap and towels or drying device shall be provided in disper es shall be provided for hand washing, food preparation ar | | e 1 (| , | |
| Corrective Descript | ion: | | | | |
| Inspector Commen Handwashing si | ts: nk in kitchen in disrepair. No hot water handle, no soap. Ro | epair immediately! | | | |
| ALL UNPACKAGED | FOODS SHALL BE PROTECTED FROM CONTAMINATIO | N - 16 31 | "Comply by Date" Not Specified | Not In Compliance | |
| Violation Descriptio | n: | | | | |
| Unpackaged for | d shall be displayed and dispensed in a manner that prote | cts the food from contamina | tion. (114063, 114065) | | |
| Corrective Descript | ion: | | | | |
| Inspector Commen | ts: | | | | |
| Please keep all | food, in refrigerators and freezers, covered after it has bee | n opened to protect from co | ntamination. | | |

ALL VENTILATION SHALL MEET REQUIREMENTS - 16 38B

Violation Description:

Exhaust hoods shall be provided to remove toxic gases, heat. grease, vapors and smoke and be approved by the local building department. Canopy-type hoods shall extend 6# beyond all cooking equipment. All areas shall have sufficient ventilation to facilitate proper food storage. Toilet rooms shall be vented to the outside air by a screened openable window, an air shaft, or a light-switch activated exhaust fan, consistent with local building codes. (114149, 114149.1)

Comply by 12/2/2020

Comply by 12/2/2020

Corrective Description:

Inspector Comments:

Ventilation hood system does not meet code. It needs a thorough cleaning and inspection immediately!

FOOD TRAINING - 16 1

Violation Description:

All food employees shall have adequate knowledge of and be trained in food safety as it relates to their assigned duties. (113947) Food facilities that prepare, handle or serve non-prepackaged potentially hazardous food, shall have an employee who has passed an approved food safety certification examination. (113947-113947.1)

Corrective Description:

Inspector Comments:

Food handler cards need to be available for inspection at all times.

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

Facility Name Site Address

: 480 ANTELOPE BLVD

Owner Owner Address : JORGE HERNANDEZ : 5045 DEBBIE LN

Overall Inspection Comments

Follow-up inspection required. Please correct all items within 30 days. Thank you.

Received By:

Date

Juna Sof.

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : CENTENNIAL : 250 E FIG LANE | | CORNING UNION HIGH SCHOOL 643 BLACKBURN AVE |
|-------------------------------------------|-----------------------------------------------------------|-------------------|------------------------------------------------|
| Facility ID Record ID | : FA0000694 : PR0000351 | Inspector Phone : | EE0000005 - Tia Branton (530) 527-8020 |
| License/Permit Number Person in Charge | 2404-16F-1 | : | 1636 - School Satellite Food |
| Inspection Date Inspection Number | : 11/20/2020 : DA0008379 : 102 - Routine Inspection | | 60 min. 01 - Meets Standards |
| Purpose of Inspection | · · · · · | | |

Inspection Violations

No violations cited.

—Overall Inspection Comments

Half of students on distance learning, half of school in session. All food comes prepackaged from Corning High.

Branton

Received By:

Date

Tia Branton

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : COLUMBIA ACADEMY : 1785 COLUMBIA AVE | Owner Owner Address | : CORNING UNION ELEM SCHOOL : 1590 SOUTH ST |
|---------------------------------------------------|--------------------------------------------|------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| Facility ID Record ID License/Permit Number | : FA0000688 : PR0000345 : 2390-16F-1 | Inspector Inspector Phone Program: | EE0000005 - Tia Branton (530) 527-8020 1636 - School Satellite Food |
| Person in Charge | | | : |
| Inspection Date | : 11/20/2020 | Total Inspection Time | : 45 min. |
| Inspection Number Purpose of Inspection | : DA0008377 : 102 - Routine Inspection | Result | : 01 - Meets Standards |
| Inspection Violation | ons | | |

No violations cited.

—Overall Inspection Comments

All food comes prepackaged and ready to serve. Only milk is held at site.

Received By:

Date

2. Branton

Tia Branton

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | CORNING UNION HIGH SCHOOL 643 BLACKBURN AVE | Owner Owner Address | : CORNING UNION HIGH SCHOOL : 643 BLACKBURN AVE |
|-------------------------------|-------------------------------------------------|------------------------|----------------------------------------------------|
| Facility ID | : FA0000517 | Inspector | EE0000017 - Jana Gosselin |
| Record ID | : PR0000124 | Inspector Phone | : Not Specified |
| License/Permit Number | : 2054-16F-1 | Program: | : 1635 - School Cafeteria/Senior |
| Person in Charge | : | | : Program |
| Inspection Date | : 11/17/2020 | Total Inspection Time | : 60 min. |
| Inspection Number | : DA0008371 | P It | · 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |
| | | | |

Inspection Violations

No violations cited.

—Overall Inspection Comments

Please check the refrigerator in the back daily. It may be struggling to maintain temperature. Everything looks good, thank you!

Jula & Sof.

Received By:

Date

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : COTTONWOOD CHEVRON : 19845 MAIN St | Owner Owner Address | : PAUL RANDHAWA : 723 WOODACRE DR |
|---------------------------------------------------|--------------------------------------------|------------------------------------------|--------------------------------------------------------------------------------------|
| Facility ID Record ID License/Permit Number | : FA0000967 : PR0001052 : 7025-16F-1 | Inspector Inspector Phone Program: | : EE0000017 - Jana Gosselin : Not Specified : 1623 - Restaurant <2000 Sq. Feet |
| Person in Charge | : | | : |
| Inspection Date | : 11/23/2020 | Total Inspection Time | : 45 min. |
| Inspection Number | : DA0008384 | Desult | · 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |

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

Inspection Violations

| ALL UNPACKAGED FOODS SHALL BE PROTECTED FROM CONTAMINATION - 16 31 | "Comply by Date" Not Specified | Not In Compliance |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------|
| Violation Description: | | |
| Unpackaged food shall be displayed and dispensed in a manner that protects the food from contan | nination. (114063, 114065) | |
| Corrective Description: | | |
| Inspector Comments: Please keep food in refrigerators and freezers that has been opened, covered. | | |
| EQUIPMENT, UTENCILS AND LINENS SHALL BE PROTECTED FROM CONTAMINATION AT ALL TIMES - 16 36 | "Comply by Date" Not Specified | Not In Compliance |
| Violation Description: | | |
| All clean and soiled linen shall be properly stored; non-food items shall be stored and displayed set (114185.3 # 114185.4) Utensils and equipment shall be handled and stored so as to be protected 114119, 114121, 114161, 114178, 114179, 114083, 114185, 114185, 114185.2, 114185.5) | | |
| Corrective Description: | | |

Inspector Comments: Please move the clean cloths away from food as discussed.

,

-Overall Inspection Comments

The store is looking good. Please continue to call beverage service to get empty CO2 canisters removed. Also remove any equipment from kitchen that is not in use to reduce the clutter. Thank you!

Juna Sof.

Received By:

Date

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : CROSSLAND'S 6 : 8215 HWY 99E | Owner Owner Address | : CHARLES CROSSLAND : 25522 LINCOLN ST |
|-------------------------------|-----------------------------------|------------------------|-------------------------------------------|
| Facility ID | : FA0000344 | Inspector | EE0000005 - Tia Branton |
| Record ID | : PR0002095 | Inspector Phone | : (530) 527-8020 |
| License/Permit Number | : PT0002185 | Program: | : 1617 - Retail Market <6000 Sq Feet |
| Person in Charge | : | | : 1 Prep Area |
| Inspection Date | : 11/13/2020 | Total Inspection Time | : 60 min. |
| Inspection Number | : DA0008362 | D It | · 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |

No violations cited.

—Overall Inspection Comments

Inspection by Tim Potanovic. All previous Cal-Code violations corrected.

Received By:

Date

2. Branton

Tia Branton

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : DISCOVERY ACADEMY : 1785 COLUMBIA AVE | Owner Owner Address | : CORNING UNION ELEM SCHOOL : 1590 SOUTH ST |
|---------------------------------------------------|---------------------------------------------------------------------|------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| Facility ID Record ID License/Permit Number | FA0000142 PR0002677 PT0002895 | Inspector Inspector Phone Program: | EE0000005 - Tia Branton (530) 527-8020 1636 - School Satellite Food |
| Person in Charge | : 11/20/2020 | Total Inspection Time | : : : 45 min. |
| Inspection Number Purpose of Inspection | : DA0008378 : 102 - Routine Inspection | Result | : 01 - Meets Standards |
| - Inspection Violation | ons | | |

No violations cited.

—Overall Inspection Comments

All food comes prepackaged and ready to serve.

Received By:

Date

Tia Branton

2. Branton

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name | : DUTCH BROS. COFFEE | Owner | : D M MAIN STREET INVESTMENTS INC |
|-----------------------|----------------------------|-----------------------|------------------------------------|
| Site Address | : 430 S MAIN ST | Owner Address | [:] P O BOX 492526 |
| Facility ID | : FA0000677 | Inspector | : EE0000017 - Jana Gosselin |
| Record ID | : PR0000330 | Inspector Phone | Not Specified |
| License/Permit Number | : 2370-16F-1 | Program: | : 1640 - Limited Food Prep (Coffee |
| Person in Charge | : | | : Stand/Hotel) |
| Inspection Date | : 11/30/2020 | Total Inspection Time | : 30 min. |
| Inspection Number | : DA0008386 | Result | · 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |

—Overall Inspection Comments

Everything looks great, thank you!

Received By:

Date

Jula & Sof.

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name | : FAST TRACK | Owner | : DAVINDER KOONER |
|--------------------------------------------|-------------------------------------------|-----------------------|--------------------------------------|
| Site Address | : 8099 HWY 99E | Owner Address | ÷ 3196 LA MANTIA DR |
| Facility ID | : FA0000989 | Inspector | : EE0000005 - Tia Branton |
| Record ID | : PR0001259 | Inspector Phone | : (530) 527-8020 |
| License/Permit Number | : 7073-16F-1 | Program: | : 1617 - Retail Market <6000 Sq Feet |
| Person in Charge | : | | : 1 Prep Area |
| Inspection Date | : 11/12/2020 | Total Inspection Time | : 60 min. |
| Inspection Number Purpose of Inspection | : DA0008364 : 102 - Routine Inspection | Result | : 01 - Meets Standards |

—Overall Inspection Comments

Inspection by Tim Potanovic. No violations noted.

Received By:

Date

Tia Branton

2. Branton

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | E FLOURNOY COUNTRY STORE | 0 | FLOURNOY COUNTRY STORE |
|-------------------------------|----------------------------|-----------------------|--------------------------------------|
| Facility ID | : FA0000536 | Inspector | EE0000017 - Jana Gosselin |
| Record ID | : PR0000144 | Inspector Phone | Not Specified |
| License/Permit Number | : 2099-16F-1 | Program: | : 1614 - Retail Market<6000 Sq. Feet |
| Person in Charge | : | | No Prep |
| Inspection Date | : 11/3/2020 | Total Inspection Time | : 75 min. |
| Inspection Number | : DA0008352 | Desult | 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |
| | | | |

Inspection Violations

No violations cited.

—Overall Inspection Comments

Please set up a temperature log as we discussed and monitor temperature of case refrigerator. If unable to maintain temperature below 41F, please repair. Thank you!

Jule & Sof.

Received By:

Date

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : FOCUS 100 : 1050 KIMBALL RD | Owner Owner Address | RED BLUFF JOINT UNION HIGH SCHOOL DIST P.O. BOX 1507 |
|---------------------------------------------------|---------------------------------------------------------------------|------------------------------------------|------------------------------------------------------------------------------------------------------------|
| Facility ID Record ID License/Permit Number | FA0001285 PR0002227 PT0002318 | Inspector Inspector Phone Program: | EE0000017 - Jana Gosselin Not Specified 1636 - School Satellite Food |
| Person in Charge | : | | : |
| Inspection Date | : 11/3/2020 | Total Inspection Time | : 20 min. |
| Inspection Number Purpose of Inspection | DA0008346 102 - Routine Inspection | Result | : 01 - Meets Standards |
| | | | |

Inspection Violations

No violations cited.

—Overall Inspection Comments

All food prepared at RB High School. Small refrigerator unit temps fine. Thank you!

Jula & Sof.

Received By:

Date

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name | : HARVEY'S HOT DOGS | | KELLY SHANE |
|-----------------------------------------------------------------------------------|--------------------------------------------------------------------|-------------------|-----------------------------------|
| Site Address | : 1920 SOLANO ST | | 2840 MARGUERITE AVE |
| Facility ID | : FA0001570 | Inspector Phone : | EE0000017 - Jana Gosselin |
| Record ID | : PR0002751 | | Not Specified |
| License/Permit Number | : PT0002969 | | 1628 - Food Vehicle Prepared Food |
| Person in Charge Inspection Date Inspection Number Purpose of Inspection | : : 11/12/2020 : DA0008360 : 106 - Pre-Opening Inspection | | 60 min. 01 - Meets Standards |

Inspection Violations

No violations cited.

—Overall Inspection Comments

Items we discussed:

- *provide soap and single serve paper towels at sink on cart and sink in restroom
- *please place an "employees must wash hands before returning to work" sign at sink in restroom
- *use bottled water in steam table

*wash and sanitize holding bin nightly

*keep permit and food handler card on cart

Cart looks great, thank you!

Received By:

Date

Jula & Sof.

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name | : JACK IN THE BOX #3489 | Owner | : KOBRA ASSOCIATES INC. |
|-----------------------|----------------------------|-----------------------|------------------------------------|
| Site Address | : 3098 HIGHWAY 99 W | Owner Address | [:] 3001 LAVA RIDGE CT |
| Facility ID | : FA0000553 | Inspector | EE0000005 - Tia Branton |
| Record ID | : PR0000167 | Inspector Phone | : (530) 527-8020 |
| License/Permit Number | : 2134-16F-1 | Program: | : 1623 - Restaurant <2000 Sq. Feet |
| Person in Charge | : | | : |
| Inspection Date | : 11/3/2020 | Total Inspection Time | : 60 min. |
| Inspection Number | : DA0008343 | Desult | · 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |

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

Inspection Violations

LIQUID WASTE MUST BE DISPOSED OF PROPERLY - 16 22

Violation Description:

All liquid waste must drain to an approved fully functioning sewage disposal system. (114197)

Corrective Description:

Inspector Comments:

All plumbing must fully drain into appropriate sized drain. NOT ONTO FLOOR. Repair water issue under drive thru soda machine immediately.

Overall Inspection Comments

Facility much cleaner then last inspection. Thank you. Please try and keep a handle on grease build up.

Received By:

Date

Tia Branton

Not In Compliance

"Comply by Date" Not

Specified

J. Branton

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : JACKSON PRESCHOOL : 224 JACKSON ST | 0 | : TEHAMA COUNTY DEPT / EDUCATION : 1135 LINCOLN ST |
|---------------------------------------------------|-------------------------------------------|-----------------------|------------------------------------------------------------------------------------------------------------|
| Facility ID Record ID License/Permit Number | : FA0001520 : PR0002672 : PT0002890 | Inspector Phone | EE0000017 - Jana Gosselin Not Specified 1636 - School Satellite Food |
| Person in Charge | : | C C | : |
| Inspection Date | : 11/3/2020 | Total Inspection Time | : 30 min. |
| Inspection Number Purpose of Inspection | : DA0008347 : 102 - Routine Inspection | Result | : 01 - Meets Standards |
| | | | |

Inspection Violations

No violations cited.

—Overall Inspection Comments

Please place a sign in the employee restroom stating that employees must wash their hands before returning to work. Kitchen looks great, thank you!

Jula & Sof.

Received By:

Date

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name | · JAVA DETOUR | Owner | : EXCELSIOR JD CO L | LC |
|------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------------------|-------------------|
| Site Address | : 550 MAIN ST | Owner Address | [:] 172 GOLDEN GATE A | VE |
| Facility ID | : FA0000557 | Inspector | : EE0000017 - Jana Go | sselin |
| Record ID | : PR0000171 | Inspector Phone | : Not Specified | |
| License/Permit Number | : 2138-16F-1 | Program: | : 1623 - Restaurant <2 | 000 Sq. Feet |
| Person in Charge | : | | : | |
| Inspection Date | : 11/16/2020 | Total Inspection Time | : 30 min. | |
| Inspection Number | : DA0008367 | Deput | · 03 - Minor Violations | |
| Purpose of Inspection | : 102 - Routine Inspection | Result | | |
| · | ection of your property revealed the following violatio | ons. Please note the date for rein | spection. Thank you for your co | operation. |
| Inspection Violation | ons - | | | |
| ALL FOOD CONTAC | T SURFACES SHALL BE KEPT CLEANED AND SA | ANITIZED - 16 14 | "Comply by Date" Not Specified | Not In Compliance |
| Violation Descriptio | n: | | | |
| | surfaces of utensils and equipment shall be clean ai 14109, 114111, 114113, 114115 (a, b, d), 114117, 1 | | , 114099.1, 114099.4, 114099.6, | 114101 |
| Corrective Descript | ion: | | | |
| Inspector Comment | ts: | | | |
| | e has mold. Please clean immediately! | | | |
| POTENTIALLY HAZA | ARDOUS FOODS HOLD TEMPERATURES - 16 7 | | "Comply by Date" Not Specified | Not In Compliance |
| Violation Descriptio | n: | | | |
| Potentially hazar | rdous foods shall be held at or below 41/ 45øF or at | t or above 135øF. (113996, 11399 | 98, 114037, 114343(a)) | |
| Corrective Descript | ion: | | | |
| Inspector Comment | ts: | | | |
| Red Bull refriger | ator not at temperature. All potentially hazardous fo | ood pulled at time of inspection. Pl | ease repair or replace. | |
| | CILITIES SHALL BE WORKING CORRECTLY AND RIFY CHEMICAL CONC - 16 34 | HAVE TESTING | "Comply by Date" Not Specified | Not In Compliance |
| Violation Descriptio | n: | | | |
| | at prepare food shall be equipped with warewashing anitization method. (114067(f,g), 114099, 114099.3, | | | |
| Corrective Descript | ion: | | | |
| Inspector Commen | ts: | | | |
| • | anitizing water! Please ensure correct sanitizer cond | centration is used at all times. Hav | ve test strips readily available for | use! |
| TOILET FACILITY MU | UST BE CLEAN, SUPPLIED AND PROPERY CONS | STRUCTED - 16 43 | "Comply by Date" Not Specified | Not In Compliance |
| Violation Descriptio | n: | | | |
| tissue shall be p building and plur | hall be maintained clean, sanitary and in good repai rovided in a permanently installed dispenser at each mbing ordinances. Toilet facilities shall be provided iquor consumption. (114250, 114250.1, 114276) | h toilet. The number of toilet facili | ities shall be in accordance with I | ocal |

Corrective Description:

Inspector Comments:

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

Facility Name Site Address · JAVA DETOUR · 550 MAIN ST Owner Owner Address : EXCELSIOR JD CO LLC : 172 GOLDEN GATE AVE

Restroom has numerous bags of trash stored inside it, they are leaking all over the floor, the floor is very sticky and it all smells fermented. Employee stated the garbage is cans to be recycled. Please rinse cans before storing and don't let them build up beyond one bag.

-Overall Inspection Comments

Please be a little more attentive to cleanliness and protocols. Thank you.

Received By:

Date

Jana Gosselin

Jula & Sof.

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name | : JD'S PIZZA | Owner | : BRANDON HILLER |
|--------------------------------------------|---------------------------------------|-----------------------|------------------------------------|
| Site Address | : 17590 RANCHO TEHAMA ROAD | Owner Address | : 236 EAST AVENUE ST A-314 |
| Facility ID | : FA0001144 | Inspector | : EE0000005 - Tia Branton |
| Record ID | : PR0001965 | Inspector Phone | : (530) 527-8020 |
| License/Permit Number | : 8518-16F-1 | Program: | : 1623 - Restaurant <2000 Sq. Feet |
| Person in Charge | : | Total Inspection Time | : |
| Inspection Date | : 11/19/2020 | | : 90 min. |
| Inspection Number Purpose of Inspection | DA0008375 102 - Routine Inspection | Result | · 01 - Meets Standards |
| - Inspection Violati | | | |

Inspection Violations

No violations cited.

—Overall Inspection Comments

Facility okay to open.

Received By:

Date

Tia Branton

2. Branton

Date

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : KAREN'S KITCHEN : 8618 HOLLIS ST | Owner Owner Address | : KAREN BLOOD : 8618 HOLLIS ST |
|-------------------------------|---------------------------------------|------------------------|-----------------------------------|
| Facility ID | : FA0001585 | Inspector | EE0000005 - Tia Branton |
| Record ID | : PR0002774 | Inspector Phone | <u>:</u> (530) 527-8020 |
| License/Permit Number | : PT0002996 | Program: | : 1655 - Cottage Food Class B |
| Person in Charge | : | | : Indirect Sale/Inspection |
| Inspection Date | : 11/2/2020 | Total Inspection Time | : 60 min. |
| Inspection Number | : DA0008335 | | · 01 - Meets Standards |
| Purpose of Inspection | : 106 - Pre-Opening Inspection | Result | |

No violations cited.

—Overall Inspection Comments

Cottage food okay to open for business. Please provide new labels as discussed.

2. Branton

Received By:

Date

Tia Branton

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : LEGENDARY : 613 MAIN ST | Owner Owner Address | : MEISHA MANAS : 4 ENTERPRISE CT |
|--------------------------------------------|-----------------------------------------------|------------------------|-------------------------------------|
| Facility ID | : FA0001530 | Inspector | : EE0000017 - Jana Gosselin |
| Record ID | : PR0002687 | Inspector Phone | Not Specified |
| License/Permit Number | : PT0002905 | Program: | : 1640 - Limited Food Prep (Coffee |
| Person in Charge | : | | : Stand/Hotel) |
| Inspection Date | : 11/9/2020 | Total Inspection Time | : 30 min. |
| Inspection Number Purpose of Inspection | : DA0008354 : 106 - Pre-Opening Inspection | Result | : 01 - Meets Standards |

Inspection Violations

No violations cited.

—Overall Inspection Comments

Facility looks great. Please have all food safety training cards available for inspection at all times. Thank you!

Jule & Sop.

Received By:

Date

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name | : LIQUOR CABINET #2 | Owner | : JAGTAR SINGH SANDHU |
|--------------------------------------------|-------------------------------------------|-----------------------|--------------------------------------|
| Site Address | : 3090 HWY 99 W | Owner Address | ÷ 5090 MONETTA LN |
| Facility ID | : FA0000577 | Inspector | EE0000005 - Tia Branton |
| Record ID | : PR0000195 | Inspector Phone | : (530) 527-8020 |
| License/Permit Number | 2169-16F-1 | Program: | : 1617 - Retail Market <6000 Sq Feet |
| Person in Charge | : | | : 1 Prep Area |
| Inspection Date | : 11/13/2020 | Total Inspection Time | : 60 min. |
| Inspection Number Purpose of Inspection | · DA0008365 · 102 - Routine Inspection | Result | : 01 - Meets Standards |

—Overall Inspection Comments

Inspection by Tim Potanovic. No violations cited.

Received By:

Date

Tia Branton

2. Branton

Date

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : LIRA'S TACOS : 1905 SOLANO ST | Owner Owner Address | : LIRAS TACOS : 1559 HERBERT AVE |
|-----------------------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| Facility ID Record ID License/Permit Number Person in Charge | FA0000578 PR0000196 2170-16F-1 | Inspector Inspector Phone Program: | EE0000017 - Jana Gosselin Not Specified 1628 - Food Vehicle Prepared Food |
| Inspection Date Inspection Number Purpose of Inspection | : 11/10/2020 : DA0008359 : 106 - Pre-Opening Inspection | Total Inspection Time Result | : 60 min. : 01 - Meets Standards |

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

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 øF 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:

Please get a metal probe thermometer for hot foods.

—Overall Inspection Comments

- Hot water heater not plugged in at time of inspection due to Jose just arriving at the scheduled inspection time. Please make sure hot water heater is plugged in and functional at all times the truck is operating. Thank you!

Received By:

Date

Jana Gosselin

Date

Not In Compliance

"Comply by Date" Not

Specified

Jule & Sof.

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : MAYWOOD SCHOOL : 1666 MARGUERITE AVE | Owner Owner Address | 2 CORNING UNION ELEM SCHOOL DIST 2 1590 SOUTH ST |
|----------------------------------------------------------------------|-------------------------------------------|------------------------|-----------------------------------------------------|
| Facility ID | : FA0000588 | Inspector | EE0000005 - Tia Branton |
| Record ID | : PR0000208 | Inspector Phone | : (530) 527-8020 |
| License/Permit Number | : 2190-16F-1 | Program: | : 1635 - School Cafeteria/Senior |
| Person in Charge | : | | : Program |
| Inspection Date | : 11/2/2020 | Total Inspection Time | : 60 min. |
| Inspection Number Purpose of Inspection | : DA0008338 : 102 - Routine Inspection | Result | : 01 - Meets Standards |
| Inspection Violati No violations cited. | | | |

—Overall Inspection Comments

Every things looks good. Thank you.

Received By:

Date

Tia Branton

2. Branton

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name | : MCDONALD'S CORNING | Owner | : BURINGTON ENT. LLC |
|-----------------------|----------------------------|-----------------------|------------------------------------|
| Site Address | : 3375 SUNRISE WAY | Owner Address | ÷ 2289 IVY ST |
| Facility ID | : FA0000590 | Inspector | : EE0000005 - Tia Branton |
| Record ID | : PR0000210 | Inspector Phone | : (530) 527-8020 |
| License/Permit Number | : 2192-16F-1 | Program: | : 1623 - Restaurant <2000 Sq. Feet |
| Person in Charge | : | | : |
| Inspection Date | : 11/3/2020 | Total Inspection Time | : 60 min. |
| Inspection Number | : DA0008344 | Deput | · 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |

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

Inspection Violations

PROPER DISPOSAL OF FOOD WASTE AND RUBBISH - 16 42

Violation Description:

All food waste and rubbish shall be kept in leak proof and rodent proof containers. Containers shall be covered at all times. All waste must be removed and disposed of as frequently as necessary to prevent a nuisance. The exterior premises of each food facility shall be kept clean and free of litter and rubbish. (114244, 114245, 114245, 114245.2, 114245.3, 114245.4, 114245.5, 114245.6, 114245.7, 114245.8)

Corrective Description:

Inspector Comments:

This facility continually has issues with grease and floor drains. Please pay special attention that these systems are properly maintained.

-Overall Inspection Comments

Facility improving. Please keep all grease cleaned up and so not allow issues to resurface.

Received By:

Date

Tia Branton

Not In Compliance

"Comply by Date" Not

Specified

J. Branton

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | NU-WAY MARKET 8049 HIGHWAY 99 E | Owner Owner Address | : BP2 RETAIL INC : 8049 HWY 99W |
|-------------------------------|--------------------------------------------------------------|------------------------|---------------------------------------|
| Sile Address | | Owner Address | . 004911001 9900 |
| Facility ID | : FA0000598 | Inspector | EE0000005 - Tia Branton |
| Record ID | : PR0000219 | Inspector Phone | : (530) 527-8020 |
| License/Permit Number | : 2207-16F-1 | Program: | : 1619 - Retail Market 6K Sq Feet-15K |
| Person in Charge | : | | : Sq Feet 2 Prep |
| Inspection Date | : 11/11/2020 | Total Inspection Time | : 60 min. |
| Inspection Number | : DA0008363 | 5 " | 01 Masta Standarda |
| Purpose of Inspection | : 102 - Routine Inspection | Result | : 01 - Meets Standards |

—Overall Inspection Comments

Inspection by Tim Potanovic. No violations. Thank you.

Received By:

Date

2. Branton

Tia Branton

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name | : OLIVE VIEW SCHOOL | Owner | : CORNING UNION ELEM SCHOOL DIST |
|-----------------------|----------------------------|-----------------------|----------------------------------|
| Site Address | : 1402 FIG ST | Owner Address | E 1590 SOUTH ST |
| Facility ID | : FA0000601 | Inspector | : EE0000005 - Tia Branton |
| Record ID | PR0000223 | Inspector Phone | : (530) 527-8020 |
| License/Permit Number | 2214-16F-1 | Program: | : 1635 - School Cafeteria/Senior |
| Person in Charge | : | | : Program |
| Inspection Date | : 11/2/2020 | Total Inspection Time | : 60 min. |
| Inspection Number | DA0008337 | D H | · 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |

—Overall Inspection Comments

Cafeteria looks good. Thank you.

Received By:

Date

Tia Branton

2. Branton

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : PAMELA'S PANTRY : 22553 S. MARINA WAY | Owner Owner Address | : PAMELA BOOTH : 22553 S. MARINA WAY |
|-------------------------------|--------------------------------------------|------------------------|-----------------------------------------|
| Facility ID | : FA0001532 | Inspector | : EE0000017 - Jana Gosselin |
| Record ID | : PR0002689 | Inspector Phone | : Not Specified |
| License/Permit Number | : PT0002907 | Program: | : 1655 - Cottage Food Class B |
| Person in Charge | : | | Indirect Sale/Inspection |
| Inspection Date | : 11/18/2020 | Total Inspection Time | : 45 min. |
| Inspection Number | : DA0008373 | | 01 Masta Chandarda |
| Purpose of Inspection | : 106 - Pre-Opening Inspection | Result | : 01 - Meets Standards |

No violations cited.

Overall Inspection Comments

Please put a dedicated thermometer in the refrigerator. Everything looks great, thank you!

Jula & Sof.

Received By:

_

Date

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name | : RAMOS DONUT HOUSE | Owner | : RAMOS DONUT HOUSE |
|-----------------------|----------------------------|-----------------------|------------------------------------------|
| Site Address | : 545 MAIN ST | Owner Address | ÷ 545 MAIN ST |
| Facility ID | : FA0000665 | Inspector | : EE0000017 - Jana Gosselin |
| Record ID | : PR0000315 | Inspector Phone | : Not Specified |
| License/Permit Number | : 2331-16F-1 | Program: | : 1623 - Restaurant <2000 Sq. Feet |
| Person in Charge | : | | : |
| Inspection Date | : 11/20/2020 | Total Inspection Time | : 30 min. |
| Inspection Number | : DA0008382 | Drault | 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |

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

Inspection Violations

POTENTIALLY HAZARDOUS FOODS HOLD TEMPERATURES - 16 7

Violation Description:

Potentially hazardous foods shall be held at or below 41/45øF or at or above 135øF. (113996, 113998, 114037, 114343(a))

Corrective Description:

Inspector Comments:

Please maintain temperature logs on the small refrigerator in the fry area and the Coke refrigerator behind the front counter. If they cannot hold temperatures below 41F, please repair.

-Overall Inspection Comments

Store is looking good. Please check batteries in paper towel dispenser in employee restroom. Thank you!

Jule & Sof.

"Comply by Date" Not

Specified

Received By:

Date

Jana Gosselin

Date

Not In Compliance

OFFICIAL FOOD INSPECTION REPORT



Not In Compliance

Not In Compliance

Tim Potanovic, REHS - Director

| Facility Name | : RED BLUFF SENIOR LIVING | Owner | TITAN SENQUEST |
|-----------------------|----------------------------|-----------------------|------------------------------|
| Site Address | · 750 DAVID AVE | Owner Address | 1230 ROSECRANS AVE 405 |
| Facility ID | : FA0000650 | Inspector | : EE0000017 - Jana Gosselin |
| Record ID | : PR0000295 | Inspector Phone | : Not Specified |
| License/Permit Number | : 2306-16F-1 | Program: | : 1624 - Restaurant 2000 Sq. |
| Person in Charge | : | | : Feet-6000 Sq. Feet |
| Inspection Date | : 11/9/2020 | Total Inspection Time | : 30 min. |
| Inspection Number | : DA0008353 | Result | · 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |

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

Inspection Violations

HAND WASHING FACILITIES REQUIRED - 16 6

Violation Description:

Handwashing soap and towels or drying device shall be provided in dispensers; dispensers shall be maintained in good repair. (113953.2) Adequate facilities shall be provided for hand washing, food preparation and the washing of utensils and equipment. (113953, 113953.1, 114067(f))

Corrective Description:

Inspector Comments:

Please mount single use paper towels at hand washing station.

ALL FOOD CONTACT SURFACES SHALL BE KEPT CLEANED AND SANITIZED - 16 14

Violation Description:

All food contact surfaces of utensils and equipment shall be clean and sanitized. (113984(e), 114097, 114099.1, 114099.4, 114099.6, 114101 (b-d), 114105, 114109, 114111, 114113, 114115 (a, b, d), 114117, 114125(b), 114141)

Corrective Description:

Inspector Comments:

Can opener dirty - corrected while inspector on site.

Overall Inspection Comments

Facility looks good. Reminder of other items we discussed: please label and date overflow bags of flour, etc kept in storage, please place dedicated thermometers in all refrigeration units (don't rely on built in ones), and keep all food at least 6" off floor in pantry. Thank you!

Jula & Sof.

"Comply by Date" Not

"Comply by Date" Not

Specified

Specified

Received By:

Date

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : SALISBURY HIGH SCHOOL : 1050 KIMBALL ROAD | Owner Owner Address | : RED BLUFF JOINT UNION HIGH SCHOOL DIST : P.O. BOX 1507 ST | |
|---------------------------------------------------|------------------------------------------------|------------------------------------------|----------------------------------------------------------------------------|--|
| Facility ID Record ID License/Permit Number | : FA0000691 : PR0000348 · 2395-16F-1 | Inspector Inspector Phone Program: | EE0000017 - Jana Gosselin Not Specified 1636 - School Satellite Food | |
| Person in Charge | : 11/3/2020 | Total Inspection Time | : : 30 min. | |
| Inspection Number Purpose of Inspection | : DA0008345 : 102 - Routine Inspection | Result | : 01 - Meets Standards | |
| Inspection Violations | | | | |

No violations cited.

—Overall Inspection Comments

Kitchen looks fine. Thank you!

Received By:

Date

Jula & Sof.

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name | : THE SHABBY SISTERHOOD | Owner | : SUSAN HARMS |
|-----------------------|----------------------------|-----------------------|------------------------------------|
| Site Address | : 723 WALNUT ST | Owner Address | ÷ 12849 WILDER RD |
| Facility ID | : FA0001204 | Inspector | : EE0000017 - Jana Gosselin |
| Record ID | : PR0002087 | Inspector Phone | : Not Specified |
| License/Permit Number | : PT0002177 | Program: | : 1623 - Restaurant <2000 Sq. Feet |
| Person in Charge | : | | : |
| Inspection Date | : 11/20/2020 | Total Inspection Time | : 30 min. |
| Inspection Number | - DA0008383 | Desut | · 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |

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

Inspection Violations

ALL FOOD SHALL BE LABELED CORRECTLY - 16 32

Violation Description:

Any food is misbranded if its labeling is false or misleading, if it is offered for sale under the name of another food, or if it is an imitation of another food for which a definition and standard of identity has been established by regulation. (114087, 114089, 114089.1(a, b), 114090, 114093.1)

Corrective Description:

Inspector Comments:

Please label single serve salads in refrigerator case, including date.

-Overall Inspection Comments

Facility looks good. Thank you!

Received By:

Date

Jana Gosselin

Not In Compliance

"Comply by Date" Not

Specified

Jule & Sof.

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : SPEEDWAY NO. 1999 : 782 ANTELOPE Blvd | Owner Owner Address | : TRMC RETAIL LLC : 500 SPEEDWAY DR |
|--------------------------------------------|--------------------------------------------|------------------------|----------------------------------------|
| Facility ID | : FA0000988 | Inspector | : EE0000017 - Jana Gosselin |
| Record ID | : PR0001249 | Inspector Phone | : Not Specified |
| License/Permit Number | : 7072-16F-1 | Program: | : 1617 - Retail Market <6000 Sq Feet |
| Person in Charge | : | | : 1 Prep Area |
| Inspection Date | : 11/2/2020 | Total Inspection Time | : 15 min. |
| Inspection Number Purpose of Inspection | : DA0008340 : 102 - Routine Inspection | Result | : 01 - Meets Standards |

No violations cited.

—Overall Inspection Comments

Sneeze guard on new hot dog roller much improved. Thank you!

New ownership to take effect after beginning of new year.

Received By:

Date

Jule & Sof.

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Not In Compliance

Not In Compliance

"Comply by Date" Not

"Comply by Date" Not

Specified

Tim Potanovic, REHS - Director

| Facility Name | : STARBUCKS COFFEE #6639 | Owner | : JEFF FARRER |
|-----------------------|----------------------------|-----------------------|------------------------------------|
| Site Address | : 1058 S MAIN ST | Owner Address | 2550 LAKECREST DR |
| Facility ID | - FA0000641 | Inspector | EE0000017 - Jana Gosselin |
| Record ID | : PR0000282 | Inspector Phone | : Not Specified |
| License/Permit Number | : 2286-16F-1 | Program: | : 1623 - Restaurant <2000 Sq. Feet |
| Person in Charge | : | | : |
| Inspection Date | : 11/30/2020 | Total Inspection Time | : 30 min. |
| Inspection Number | : DA0008387 | | · 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | : 01 - Meets Standards |

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

Inspection Violations

TOILET FACILITY MUST BE CLEAN, SUPPLIED AND PROPERY CONSTRUCTED - 16 43

Violation Description:

Toilet facilities shall be maintained clean, sanitary and in good repair. Toilet rooms shall be separated by a well-fitting self-closing door. Toilet tissue shall be provided in a permanently installed dispenser at each toilet. The number of toilet facilities shall be in accordance with local building and plumbing ordinances. Toilet facilities shall be provided for patrons: in establishments with more than 20,000 sq ft.; establishments offering on-site liquor consumption. (114250, 114250.1, 114276)

Corrective Description:

Inspector Comments:

Wall and flooring in restroom closest to front must be repaired before restroom re-opens.

PROPER DISPOSAL OF FOOD WASTE AND RUBBISH - 16 42

Violation Description:

All food waste and rubbish shall be kept in leak proof and rodent proof containers. Containers shall be covered at all times. All waste must be removed and disposed of as frequently as necessary to prevent a nuisance. The exterior premises of each food facility shall be kept clean and free of litter and rubbish. (114244, 114245, 114245, 114245.2, 114245.3, 114245.4, 114245.5, 114245.6, 114245.7, 114245.8)

Corrective Description:

Inspector Comments:

(Shared) garbage facility in the parking lot is in terrible shape. Lids open, gates open, garbage on ground around and behind enclosure. Please work with your neighbors to keep this area clean. Thank you!

-Overall Inspection Comments

Inside of restaurant looks good. Thank you!

Received By:

Date

Jule & Sof.

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : SUNSHINE FOOD AND GAS : 22700 ANTELOPE Blvd | Owner Owner Address | : GURDEV SINGH & BAL KAUR : 22700 ANTELOPE BLVD |
|-------------------------------|--------------------------------------------------|------------------------|----------------------------------------------------|
| Facility ID | : FA0000992 | Inspector | : EE0000017 - Jana Gosselin |
| Record ID | : PR0001287 | Inspector Phone | · Not Specified |
| License/Permit Number | : 7076-16F-1 | Program: | : 1617 - Retail Market <6000 Sq Feet |
| Person in Charge | : | | : 1 Prep Area |
| Inspection Date | : 11/20/2020 | Total Inspection Time | : 30 min. |
| Inspection Number | : DA0008381 | Desult | · 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |

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

Inspection Violations

ALL FOOD SHALL BE LABELED CORRECTLY - 16 32

Violation Description:

Any food is misbranded if its labeling is false or misleading, if it is offered for sale under the name of another food, or if it is an imitation of another food for which a definition and standard of identity has been established by regulation. (114087, 114089, 114089.1(a, b), 114090, 114093.1)

Corrective Description:

Inspector Comments:

Single serving salads packaged for sale in the sandwich refrigerator must be labeled, including a date.

-Overall Inspection Comments

Store looks good, thank you!

Received By:

Date

Jana Gosselin

Not In Compliance

"Comply by Date" Not

Specified

Jule & Sof.

OFFICIAL FOOD INSPECTION REPORT



Not In Compliance

Tim Potanovic, REHS - Director

| Facility Name Site Address | : THAI HOUSE : 248 S MAIN ST | Owner Owner Address | : KIRATHI TANATCHASAI : 18809 GERKIN AVE |
|-------------------------------|---------------------------------|------------------------|---------------------------------------------|
| Facility ID | : FA0000508 | Inspector | : EE0000017 - Jana Gosselin |
| Record ID | : PR0000114 | Inspector Phone | : Not Specified |
| License/Permit Number | : 2039-16F-1 | Program: | : 1623 - Restaurant <2000 Sq. Feet |
| Person in Charge | : | | : |
| Inspection Date | : 11/18/2020 | Total Inspection Time | : 45 min. |
| Inspection Number | : DA0008374 | D " | · 03 - Minor Violations |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |
| | | | |

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

Inspection Violations

| ALL UNPACKAGED FOODS SHALL BE PROTECTED FROM CONTAMINATION - 16 31 | "Comply by Date" Not Specified | Not In Compliance |
|---------------------------------------------------------------------------------------------------|-----------------------------------|-------------------|
| Violation Description: | | |
| Unpackaged food shall be displayed and dispensed in a manner that protects the food from o | contamination. (114063, 114065) | |
| Corrective Description: | | |
| Inspector Comments: | | |
| Please keep all food stored in the refrigerator or freezer covered at all times to protect from c | contamination. | |
| WIPING CLOTHES KEPT CLEAN - 16 40 | "Comply by Date" Not Specified | Not In Compliance |
| | | |

Violation Description:

Wiping cloths used to wipe service counters, scales or other surfaces that may come into contact with food shall be used only once unless kept in clean water with sanitizer. (114135, 114185.1 114185.3 (d-e))

Corrective Description:

Inspector Comments:

Please keep wiping cloths in a bucket of sanitizer and change for clean ones frequently.

Overall Inspection Comments

Thank you for making the changes we discussed.

Jula & Sof.

Received By:

Date

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : VINA ELEMENTARY SCHOOL : 4790 D St | Owner Owner Address | LOS MOLINOS ELEMENTARY SCHOOL 7851 HIGHWAY 99E |
|-------------------------------|-----------------------------------------|------------------------|----------------------------------------------------|
| Facility ID | : FA0000839 | Inspector | : EE0000005 - Tia Branton |
| Record ID | : PR0000701 | Inspector Phone | : (530) 527-8020 |
| License/Permit Number | : 5282-16F-1 | Program: | : 1635 - School Cafeteria/Senior |
| Person in Charge | : | | : Program |
| Inspection Date | : 11/20/2020 | Total Inspection Time | : 60 min. |
| Inspection Number | : DA0008380 | Desult | · 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |
| | | | |

Inspection Violations

No violations cited.

—Overall Inspection Comments

All food comes prepackaged and ready to serve. Only milk is held at site. PLEASE PROVIDE THIS OFFICE WITH KITCHEN REMODEL PLAN. MUST BE APPROVED BY THIS OFFICE.

2. Branton

Received By:

Date

Tia Branton

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name | : VINA MARKET AND DELI | Owner | MARIA RODRIGUEZ AND BRANDON RODRIGLP O BOX 173 |
|-----------------------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Site Address | : 4760 ROWLES ROAD | Owner Address | |
| Facility ID Record ID License/Permit Number Person in Charge | FA0000659 PR0000308 2323-16F-1 | Inspector Inspector Phone Program: | EE0000005 - Tia Branton (530) 527-8020 1617 - Retail Market <6000 Sq Feet 1 Prep Area |
| Inspection Date | : 11/20/2020 | Total Inspection Time | : 60 min. |
| Inspection Number | : DA0008385 | Result | : 04 - Major Violations |
| Purpose of Inspection | : 102 - Routine Inspection | | |

Inspection Violations

No violations cited.

-Overall Inspection Comments

Facility NOT in compliance. This issue has been ongoing, and we have tried working with you. Food prep allowed only after extensive work and repairs are completed. An administrative hearing in our office may take place if problems persist.

Received By:

Date

Tia Branton

I. Branton

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Site Address | : 900 WEST STREET | Owner Address | : 1590 SOUTH ST |
|-----------------------|----------------------------------------------|-----------------------|----------------------------------|
| Facility ID | : FA0000663 | Inspector | : EE0000005 - Tia Branton |
| Record ID | : PR0000313 | Inspector Phone | : (530) 527-8020 |
| License/Permit Number | : 2327-16F-1 | Program: | : 1635 - School Cafeteria/Senior |
| Person in Charge | : | | : Program |
| Inspection Date | : 11/2/2020 | Total Inspection Time | : 60 min. |
| Inspection Number | : DA0008336 | D H | · 01 - Meets Standards |
| Purpose of Inspection | 102 - Routine Inspection | Result | |

Overall Inspection Comments Facility looks great. Thank you.

Received By:

Date

Tia Branton

2. Branton

Date

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name | E WILCOX OAKS GOLF CLUB | Owner Source States Sta | WILCOX OAKS GOLF CLUB |
|-----------------------------------------------------------------------------------|----------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Site Address | E 20995 WILCOX RD | | P O BOX 127 |
| Facility ID | FA0001050 PR0001628 8227-16F-1 | Inspector : | EE0000017 - Jana Gosselin |
| Record ID | | Inspector Phone : | Not Specified |
| License/Permit Number | | Program: | 1623 - Restaurant <2000 Sq. Feet |
| Person in Charge Inspection Date Inspection Number Purpose of Inspection | : 11/3/2020 : DA0008349 : 102 - Routine Inspection | Total Inspection Time | 30 min. 01 - Meets Standards |

Inspection Violations

No violations cited.

—Overall Inspection Comments

Please have food handler cards available for inspection in the kitchen. The food manager's safety training certificate should be posted. Kitchen looks great, thank you!

Juna Sof.

Received By:

Date

Jana Gosselin

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : WOODSON ELEMENTARY SCHOOL : NW CORNER TOOMES & GARDINER | Owner Owner Address | : CORNING UNION ELEM SCHOOL DIST : 1590 SOUTH ST |
|-------------------------------|--------------------------------------------------------------|------------------------|-----------------------------------------------------|
| Facility ID | : FA0000664 | Inspector | : EE0000005 - Tia Branton |
| Record ID | : PR0000314 | Inspector Phone | : (530) 527-8020 |
| License/Permit Number | : 2329-16F-1 | Program: | : 1635 - School Cafeteria/Senior |
| Person in Charge | : | | : Program |
| Inspection Date | : 11/16/2020 | Total Inspection Time | : 60 min. |
| Inspection Number | : DA0008372 | | · 01 - Meets Standards |
| Purpose of Inspection | : 102 - Routine Inspection | Result | |
| | | | |

Inspection Violations

No violations cited.

—Overall Inspection Comments

Keep on eye of freezer. Evidence of freezing up...which will lead to issued and failure in the future.

J. Branton

Received By:

Date

Tia Branton

OFFICIAL FOOD INSPECTION REPORT



Tim Potanovic, REHS - Director

| Facility Name Site Address | : YAYA'S TACO SHOP : 615 FOURTH STREET | Owner Owner Address | E ROSALBA RIVERA |
|---------------------------------------------------|--------------------------------------------|------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| Facility ID Record ID License/Permit Number | : FA0000697 : PR0000354 : 2410-16F-1 | Inspector Inspector Phone Program: | EE0000005 - Tia Branton (530) 527-8020 1623 - Restaurant <2000 Sq. Feet |
| Person in Charge | : | , | : |
| Inspection Date | : 11/3/2020 | Total Inspection Time | : 60 min. |
| Inspection Number Purpose of Inspection | : DA0008342 : 102 - Routine Inspection | Result | : 01 - Meets Standards |
| Inspection Violations | | | |

No violations cited.

—Overall Inspection Comments

Facility looks great. Okay to open for business.

Received By:

Date

Tia Branton

2. Branton