

**TRINITY COUNTY
DIVISION OF ENVIRONMENTAL HEALTH
FOOD PROGRAM OFFICIAL INSPECTION REPORT**

DBA/NAME <i>Douglas City School</i>	DATE <i>3-27-2014</i>
ADDRESS	RECHECK DATE
OWNER/OPERATOR	SITE #
MAILING ADDRESS	CORRECT MAJOR VIOLATIONS BY:
FOOD CERT <i>Toviah Jacobs</i> EXP <i>11/1/2014</i>	CORRECT MINOR VIOLATIONS BY:

In = In Compliance N/O = Not Observed N/A = Not Applicable OUT = Out of Compliance COS = Corrected On-Site MAJ = Major Violation

IN	N/O	N/A	DEMONSTRATION OF KNOWLEDGE			IN	N/O	N/A	PROTECTION FROM CONTAMINATION			
			COS	MAJ	OUT				COS	MAJ	OUT	
<input checked="" type="checkbox"/>			1. Demonstration of knowledge; food safety certification 9/18/2014			<input checked="" type="checkbox"/>			12. Proper procedures followed for returned and re-service of food			
			EMPLOYEE HEALTH & HYGIENIC PRACTICES						FOOD FROM APPROVED SOURCES			
		<input checked="" type="checkbox"/>	2. Communicable disease; reporting, restrictions & exclusions			<input checked="" type="checkbox"/>			14. Food obtained from approved source			
<input checked="" type="checkbox"/>			3. No discharge from eyes, nose, and mouth			<input checked="" type="checkbox"/>			15. Shelf stock with completed tags, in good condition, properly stored/displayed			
<input checked="" type="checkbox"/>			4. Proper eating, tasting, drinking or tobacco use			<input checked="" type="checkbox"/>			16. Compliance with Gulf Oyster Regulations			
<input checked="" type="checkbox"/>			5. Hands clean and properly washed; gloves used properly					<input checked="" type="checkbox"/>	SPECIAL PROCEDURES			
<input checked="" type="checkbox"/>			6. Adequate handwashing facilities supplied & accessible					<input checked="" type="checkbox"/>	17. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan			
			TIME AND TEMPERATURE RELATIONSHIPS					<input checked="" type="checkbox"/>	18. Consumer advisory provided for raw or undercooked foods			
<input checked="" type="checkbox"/>			7. Proper hot and cold holding temperatures					<input checked="" type="checkbox"/>	20. Licensed health care facilities/ public & private schools; prohibited foods not offered			
	<input checked="" type="checkbox"/>		8. Time as a public health control: Proper procedures & records			<input checked="" type="checkbox"/>			WATER & WASTE WATER			
	<input checked="" type="checkbox"/>		9. Proper cooling methods					<input checked="" type="checkbox"/>	21. Hot and cold water available Temp			
<input checked="" type="checkbox"/>			10. Proper cooking time & temperatures			<input checked="" type="checkbox"/>			LIQUID WASTE DISPOSAL			
<input checked="" type="checkbox"/>			11. Proper reheating procedures for hot holding			<input checked="" type="checkbox"/>			22. Sewage and wastewater properly disposed			
			32.1 - 0.4, 39.0, 36.3, 38.4, 36.0, 14.7 14.5, 16.5, 36.8, 39.3 Hent San 1/26/14			<input checked="" type="checkbox"/>			VERMIN			
						<input checked="" type="checkbox"/>			23. No rodents, insects, birds, or animals			
					OUT							OUT
			SUPERVISION / PERSONAL CLEANLINESS						ADDITIONAL VIOLATIONS			
			25. Person in charge present and performs duties						39. Adequate ventilation and lighting; designated areas, use			
			26. Personal cleanliness and hair restraints						40. Thermometers provided and accurate			
			GENERAL FOOD SAFETY REQUIREMENTS						PHYSICAL FACILITIES			
			27. Approved thawing methods used; frozen food maintained frozen.						42. Plumbing: Plumbing in good repair, proper backflow devices			
			28. Food separated and protected						43. Garbage and refuse properly disposed; facilities maintained			
			29. Fruits and vegetables washed as required.						44. Toilet facilities: properly constructed, supplied, cleaned			
			30. Toxic substances properly identified, stored, used						45. Premises; personal/cleaning items; vermin-proofing			
			FOOD STORAGE/ DISPLAY/ SERVICE						PERMANENT FOOD FACILITIES			
			31. Food properly stored; food storage containers identified						46. Floor, walls and ceilings: properly built, maintained in good repair, and clean			
			32. Consumer self-service facilities properly constructed and maintained						47. No unapproved private homes/ living or sleeping quarters			
			33. Food properly labeled & honestly presented						SIGNS, MISC. REQUIREMENTS & ENFORCEMENT			
			EQUIPMENT/ UTENSILS/ LINENS						48. Signs posted; last inspection report available			
			34. Nonfood contact surfaces clean and in good repair.						49. Plan review required for new or remodel construction			
			35. Warewashing facilities: Adequate, maintained, properly used, test strips available						50. Permits Available			
			36. Equipment/ Utensils Approved; installed properly, clean, good repair, capacity						51. Impoundment of unsanitary equipment or food			
			37. Equipment, utensils and linens: Properly stored and used						52. Permit Suspension			
			38. Vending machines						53. Other			

OBSERVATIONS AND CORRECTIVE ACTIONS: *Make sure to take temp less every day. Most but not all days on logs. Great job on temp, sanitization, and labeling. Keep up the good work.*

Rainspection fees will be charged for all subsequent reinspections unless an acceptable corrective time schedule has been submitted and approved by this Department. If, for any reasons beyond your control, you cannot correct the indicted violations by the next scheduled time, call this office prior to the inspection day.
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**TRINITY COUNTY
ENVIRONMENTAL HEALTH
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WEAVERVILLE, CA 96093
(530) 623-1459**

R.E.H.S. *[Signature]*
RECEIVED BY: *[Signature]*