

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

DBA/NAME <i>Holiday - River Rock</i>	DATE <i>11/16/2023</i>
ADDRESS	RECHECK DATE
OWNER/OPERATOR	SITE #
MAILING ADDRESS	CORRECT MAJOR VIOLATIONS BY:
FOOD CERT <i>Jeffrey Edinb</i> ^{EXP}	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	COS	MAJ	OUT	IN	N/O	N/A	PROTECTION FROM CONTAMINATION	COS	MAJ	OUT	
<input checked="" type="checkbox"/>			1. Demonstration of knowledge; food safety certification 9/18/2014				<input checked="" type="checkbox"/>		<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"/>		<input checked="" type="checkbox"/>	2. Communicable disease; reporting, restrictions & exclusions				<input checked="" type="checkbox"/>			13. Food contact surfaces: clean and sanitized				
<input checked="" type="checkbox"/>			3. No discharge from eyes, nose, and mouth				<input checked="" type="checkbox"/>			14. Food obtained from approved source				
<input checked="" type="checkbox"/>			4. Proper eating, tasting, drinking or tobacco use				<input checked="" type="checkbox"/>			15. Shelf stock with completed tags, in good condition, properly stored/displayed				
<input checked="" type="checkbox"/>			5. Hands clean and properly washed; gloves used properly						<input checked="" type="checkbox"/>	16. Compliance with Gulf Oyster Regulations				
<input checked="" type="checkbox"/>			6. Adequate handwashing facilities supplied & accessible				SPECIAL PROCEDURES							
			TIME AND TEMPERATURE RELATIONSHIPS						<input checked="" type="checkbox"/>		17. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan			
<input checked="" type="checkbox"/>			7. Proper hot and cold holding temperatures					<input checked="" type="checkbox"/>		18. Consumer advisory provided for raw or undercooked foods				
			8. Time as a public health control: Proper procedures & records					<input checked="" type="checkbox"/>		19. Licensed health care facilities/ public & private schools; prohibited foods not offered				
			9. Proper cooling methods				WATER & WASTE WATER							
			10. Proper cooking time & temperatures				<input checked="" type="checkbox"/>			21. Hot and cold water available Temp				
			11. Proper reheating procedures for hot holding				LIQUID WASTE DISPOSAL							
			<i>20. 4, 4.4, 35.3, 33.2, 31.2</i>				<input checked="" type="checkbox"/>			22. Sewage and wastewater properly disposed				
							VERMIN							
							<input checked="" type="checkbox"/>			23. No rodents, insects, birds, or animals				
			<i>Great San/DW Heat</i>			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.				41. Wiping cloths: properly used and stored							
			28. Food separated and protected				42. Plumbing: Plumbing in good repair, proper backflow devices							
			29. Fruits and vegetables washed as required.				43. Garbage and refuse properly disposed; facilities maintained							
			30. Toxic substances properly identified, stored, used				44. Toilet facilities: properly constructed, supplied, cleaned							
FOOD STORAGE/ DISPLAY/ SERVICE							PERMANENT FOOD FACILITIES							
			31. Food properly stored; food storage containers identified				45. Premises; personal/cleaning items; vermin-proofing							
			32. Consumer self-service facilities properly constructed and maintained				46. Floor, walls and ceilings: properly built, maintained in good repair, and clean							
			33. Food properly labeled & honestly presented				47. No unapproved private homes/ living or sleeping quarters							
EQUIPMENT/ UTENSILS/ LINENS							SIGNS, MISC. REQUIREMENTS & ENFORCEMENT							
			34. Nonfood contact surfaces clean and in good repair.				48. Signs posted; last inspection report available							
			35. Warewashing facilities: Adequate, maintained, properly used, test strips available				49. Plan review required for new or remodel construction							
			36. Equipment/ Utensils Approved; installed properly, clean; good repair, capacity				50. Permits Available							
			37. Equipment, utensils and linens: Properly stored and used				51. Impoundment of unsanitary equipment or food							
			38. Vending machines				52. Permit Suspension							
							53. Other							

OBSERVATIONS AND CORRECTIVE ACTIONS: *Heat work with temps and sanitization. (1)*

Reinspection fees will be charged for all subsequent reinspection 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.

**TRINITY COUNTY
ENVIRONMENTAL HEALTH
61 AIRPORT RD
P.O. BOX 476
WEAVERVILLE, CA 96093
(530) 623-1459**

R.E.H.S. *[Signature]*

RECEIVED BY: *[Signature]*