

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

DBA/NAME <i>Hyampom General Store</i>		DATE <i>10/18/2008</i>
ADDRESS		RECHECK DATE
OWNER/OPERATOR		SITE #
MAILING ADDRESS		CORRECT MAJOR VIOLATIONS BY:
FOOD CERT	EXP <i>due by 12/18/2008</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	COS	MAJ	OUT	IN	N/O	N/A	PROTECTION FROM CONTAMINATION	COS	MAJ	OUT
			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"/>	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"/>
		<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"/>		<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				
		<input checked="" type="checkbox"/>	8. Time as a public health control: Proper procedures & records					<input checked="" type="checkbox"/>	20. Licensed health care facilities/ public & private schools; prohibited foods not offered				
		<input checked="" type="checkbox"/>	9. Proper cooling methods				WATER & WASTE WATER						
		<input checked="" type="checkbox"/>	10. Proper cooking time & temperatures				<input checked="" type="checkbox"/>		21. Hot and cold water available Temp				
		<input checked="" type="checkbox"/>	11. Proper reheating procedures for hot holding				LIQUID WASTE DISPOSAL						
							<input checked="" type="checkbox"/>		22. Sewage and wastewater properly disposed				
							VERMIN						
							<input checked="" type="checkbox"/>		23. No rodents, insects, birds, or animals				
						OUT							OUT
SUPERVISION /PERSONAL CLEANLINESS							PHYSICAL FACILITIES						
			25. Person in charge present and performs duties						39. Adequate ventilation and lighting; designated areas, use				<input checked="" type="checkbox"/>
			26. Personal cleanliness and hair restraints						40. Thermometers provided and accurate				
GENERAL FOOD SAFETY REQUIREMENTS							PERMANENT FOOD 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							SIGNS, MISC. REQUIREMENTS & ENFORCEMENT						
			31. Food properly stored; food storage containers identified						48. Signs posted; last inspection report available				
			32. Consumer self-service facilities properly constructed and maintained						49. Plan review required for new or remodel construction				
			33. Food properly labeled & honestly presented						50. Permits Available				
EQUIPMENT/ UTENSILS/ LINENS							PERMITS						
			34. Nonfood contact surfaces clean and in good repair.						51. Impoundment of unsanitary equipment or food				
			35. Warewashing facilities: Adequate, maintained, properly used, test strips available						52. Permit Suspension				
			36. Equipment/ Utensils Approved; installed properly, clean; good repair, capacity						53. Other				
			37. Equipment, utensils and linens: Properly stored and used										
			38. Vending machines										

6.0, 3.9, 7.4, 9.0, 12.9, 34.9, 4.5, 5.7, -1.2, -33, 25.7, 40.1

OBSERVATIONS AND CORRECTIVE ACTIONS: *We're looking into the USDA stamp on R&R meats. Make sure to send me your Food Safety Manager's Certification within 60 days, you need this for the bagging of ice. Need to get thermometers in all cold holds that contain food or drink.*

Reinspection 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
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(530) 623-1459**

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