

Food Program Official Inspection Report

Siskiyou County Community Development Department Environmental Health Division 806 S. Main Street Yreka, California 96097

phone: (530) 841-2100, fax: (530) 841-4076

Facility	Facility Name: Weed Elementary Permit # 000476							
Addres		575 White Ave			6094			
Permit Holder: Weed Elementary						Pe X	rmit To Operate: Valid Not Val	id
Phone	·	530-938-6150				E-mail: msharp@weedelem.k12.ca.us		
Food S	Safet	ty Certified Employ	^{/ee:} Mar	ia Sha	arp	Ex	piration Date: 01/20	25
			MAJ OU			The marked items represent Health Code violations and must be co		
Protection Time/ Temp.	1	Food Temp.				ROUTINE INSPECTION CONDUCTED ON TI	HIS DATE	
	2	Prep./ Service						
	3	Storage/ Disp.				SATISFACTORY AT PRESENT TIME		
	\vdash	Frozen Food						
		Pure Food		$oxed{oxed}$				
	6	Reused Food		\perp				
	-	Transportation		\perp				
Food Storage	-	Storage Fac.	igspace	$\perp \!\!\!\! \perp$				
	-	Refrig. Units	$\vdash \vdash$	\perp				
	-	Thermometer	 	+				
	_	Hazardous Mat.	$\vdash\vdash$	+				
		Spoils	$\vdash \vdash$	+				
Uten./Equip.	-	Wash/ Sanitize	 	$+\!-\!\!\!-\!\!\!\!-$				
		Equip. Condition	+-+	+				
Uter	_	Utensil Condition	\vdash	+				
_	-	Storage	\vdash	+				
yee		Handwashing Employee Hygiene		+				
Employee		Employee Habits	+	+				
Εn		Food Cert./ Card		+				
e	-	Water	++	+				
Water	-	Cross Con.		+				
ste	-	Liquid Waste		1				
Waste	24	Refuse		$\uparrow \neg$				
Vermin	25	Rodents/ Insects		\dagger				
Verr	26	Animal/ Fowl						
	27	Ventilation						
SS	28	Doors						
Facilities	29	Floors						
Fас	30	Walls - Ceilings						
	31	Toilet Fac.						
	_	Janitorial Fac.						
		Lighting						
Misc.	34	Clothing - Linen	Щ	$oldsymbol{ol}}}}}}}}}}}}}}}}}}$				
Σ		Signs		\perp				
- 4 4 1		Misc.				222		
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site Received By (Print): Received by (Signature): Date:								
		Maria S	harp				2/29/2024	
REHS (Print): REHS Alexa Roche						REHS (Signature): Ph	one: 530-841-2117	7

Facility Name:	Weed Elementary	
	The marked items represent Health Code violations	and must be corrected as follows:
Received By (Print):	Received by (Signature):	Date:
Ma	aria Sharp	2/29/2024
REHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

Facility Name:	Weed Elementary	
	The marked items represent Health Code violations and must be corrected as follows:	DWS:
Received By (Print): Mar	Received by (Signature): ria Sharp	Date: 2/29/2024
REHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

Facility Name:	Weed Elementary	
	The marked items represent Health Code violations and must be corrected as follows:	
	· ·	
Received By (Print): Mai	Received by (Signature): D. ria Sharp	ate: 2/29/2024
REHS (Print):		none:

530-841-2117

Alexa Roche