



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 Name: Senor Tequila Restaraunt | Permit # 000412 |
| Address: 337 Main Street Tulelake CA 96134 | |
| Permit Holder: Roger and Rina Villalpando | Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid |
| Phone: 530-667-4201 | E-mail: rinaakashi85@gmail.com |
| Food Safety Certified Employee: Roger Villalpando | Expiration Date: 03/2028 |

| | | MAJ | OUT | COS | |
|------------------------|----|-------------------|-----|-----|---|
| | | | | | The marked items represent Health Code violations and must be corrected as follows: |
| Protection Time/ Temp. | 1 | Food Temp. | | | |
| | 2 | Prep./ Service | | | |
| | 3 | Storage/ Disp. | | | |
| | 4 | Frozen Food | | | |
| | 5 | Pure Food | | | |
| | 6 | Reused Food | | | |
| | 7 | Transportation | | | |
| Food Storage | 8 | Storage Fac. | | | |
| | 9 | Refrig. Units | | | |
| | 10 | Thermometer | | | |
| | 11 | Hazardous Mat. | | | |
| | 12 | Spoils | | | |
| Uten./Equip. | 13 | Wash/ Sanitize | | | |
| | 14 | Equip. Condition | | | |
| | 15 | Utensil Condition | | | |
| | 16 | Storage | | | |
| Employee | 17 | Handwashing | | | |
| | 18 | Employee Hygiene | | | |
| | 19 | Employee Habits | | | |
| | 20 | Food Cert./ Card | | | |
| Water | 21 | Water | | | |
| | 22 | Cross Con. | | | |
| Waste | 23 | Liquid Waste | | | |
| | 24 | Refuse | | | |
| Vermin | 25 | Rodents/ Insects | | | |
| | 26 | Animal/ Fowl | | | |
| Facilities | 27 | Ventilation | | | |
| | 28 | Doors | | | |
| | 29 | Floors | | | |
| | 30 | Walls - Ceilings | | | |
| | 31 | Toilet Fac. | | | |
| | 32 | Janitorial Fac. | | | |
| | 33 | Lighting | | | |
| Misc. | 34 | Clothing - Linen | | | |
| | 35 | Signs | | | |
| | 36 | Misc. | | | |

ROUTINE INSPECTION CONDUCTED ON THIS DATE

SATISFACTORY AT PRESENT TIME

| | |
|---|---|
| MAJ = Major violation OUT = Out of compliance COS = Corrected on-site | |
| Received By (Print): Roger Villalpando | Received by (Signature): _____ Date: 3/14/2024 |
| REHS (Print): Alexa Roche | REHS (Signature): _____ Phone: 530-598-3228 |

Facility Name: Senor Tequila Restaraunt

The marked items represent Health Code violations and must be corrected as follows:

Received By (Print):

Roger Villalpando

Received by (Signature):

Date:

3/14/2024

REHS (Print):

Alexa Roche

REHS (Signature):

Phone:

530-598-3228

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