OSILITY OF SISANIE

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	Na	me: Jock's Sup	erm	arke	t	Permit # 000272			
Address: 395 Modoc Ave, Tulelake CA									
Permit	Hol	^{der:} Yis Enterpr	ises			Permit To Operate: X Valid Not Valid			
Phone	Phone: 530-667-2612 E-mail: manjeetmore@hotmail.com								
Food Safety Certified Employee: Expiration Date:									
MAJ OUT COS The marked items represent Health Code violations and must be corrected as follows:									
Protection Time/ Temp.	1	Food Temp.	1017 (0	001	000	COMPLAINT INSPECTION CONDUCTED ON THIS DATE			
		Prep./ Service				COMPLAINT INSPECTION CONDUCTED ON THIS DATE			
	3	Storage/ Disp.				Received complaint that facility was selling spoiled food items.			
	4	Frozen Food		X					
	5	Pure Food				16) 2ND NOTICE: Observed broken kitchen equipment and household-use only items throughout			
	6	Reused Food				the entire facility. The food facility shall be free of all items that are unnecessary to the operation of			
Prc	7	Transportation				the facility, non-functional, and no longer used. Any items not appropriate for food storage and no longer in use shall be removed within the next 60 days.			
4)	8	Storage Fac.							
Food Storage	9	Refrig. Units		X		4.0) Observed severy research in the wells in fragment legisless and at small have affected days the well			
Sto	10	Thermometer				4,9) Observed compressor in the walk-in freezer leaking onto stored boxes of food, down the wall, and onto the floor. Store all food in a manner as to protect it from possible contamination. Repair or			
poo	11	Hazardous Mat.				replace immediately.			
Ĕ	12	Spoils		X	X				
ġ	13	Wash/ Sanitize				9) 2ND NOTICE: Observed the walk-in freezer room to be undergoing construction and is open to			
Uten./Equip.	14	Equip. Condition				the dirt, sub-flooring, and wall insulation of unimproved areas. Finish all construction before utilizing this space for food storage. Provide this Department with pre-approved renovation plans, and			
en./	15	Utensil Condition				relocate all food items to a secure location until the construction is finished and approved, Correct			
ın	16	Storage		X		within the next 60 days.			
Ф	17	Handwashing							
Employee	18	Employee Hygiene				9,29) 2ND NOTICE: Observed excessive trash, dirt, and food debris build-up in the walk-in			
dw:	19	Employee Habits				refrigeration and freezer unit throughout the entire facility. Ensure that all floors are promptly cleaned and consistently maintained in a cleanly manner at all times.			
	20	Food Cert./ Card				steamed and semestering manifesting the steamy manifest at an amost			
Water		Water				23) 2ND NOTICE: Observed commercial ice machine discharging into a bucket. A ice machine			
		Cross Con.				must discharge indirectly into an approved waste disposal. Correct within the next 60 days.			
Waste		Liquid Waste		X		12) 3RD NOTICE: Observed 12 items of expired baby formula being sold. The formula expired on			
		Refuse				April 1, 2024, and any retail food facility that violates this section is guilty of infraction, punishable			
Vermin		Rodents/ Insects				by a fine of not more than \$10 dollars per day for each item sold or offered for sale after the "use			
Ve		Animal/ Fowl				by" date. The total from this inspection would have amounted to \$360, and if this violation persists,			
	27	Ventilation				a fine will be imposed. Correct on-site.			
ies		Doors				REINSPECTION FEE ASSESSED FOR NONCOMPLAINCE			
Facilities		Floors		X					
Eg.		Walls - Ceilings							
		Toilet Fac.							
	32	Janitorial Fac.							
		Lighting							
Misc.		Clothing - Linen							
Σ		Signs							
MA.I =		Misc. or violation C	UT =	Out	of com	apliance COS = Corrected on-site			
		/ (Print):				Received by (Signature): Date:			
Liana Alexander 4/3/2024									
REHS (Print): REHS (Signature): Phone: Alexa Roche 530-841-2117									

Facility Name: Jock	s's Supermarket	
Th	e marked items represent Health Code violations and must b	e corrected as follows:
	·	
Received By (Print):	Received by (Signature):	Date:
Liana A	lexander	4/3/2024
REHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

Facility Name: Jo	ock's Supermarket	
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Liana <i>F</i>	Alexander	4/3/2024
EHS (Print):	REHS (Signature):	Phone:

530-841-2117

Alexa Roche

Facility Name:	lock's Supermarket	
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Liana RFHS (Print)	Alexander REHS (Signature):	4/3/2024 Phone:

530-841-2117

Alexa Roche