



### 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: <b>Higher Grounds Coffee</b>	Permit # <b>000862</b>
Address: <b>190 N Weed Blvd, CA 96094</b>	
Permit Holder: <b>Kayley Franklin</b>	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: <b>530-471-8917</b>	E-mail: <b>Kayley@highergroundscoffeestand.com</b>
Food Safety Certified Employee: <b>Kayley Franklin</b>	Expiration Date: <b>08/2028</b>

		MAJ	OUT	COS	
					The marked items represent Health Code violations and must be corrected as follows:
Protection Time/ Temp.	1	Food Temp.			<p style="text-align: center; margin-top: 0;">ROUTINE INSPECTION CONDUCTED ON THIS DATE</p> <p>30) 2ND NOTICE: Observed pass-thru window without a self-closing mechanism and screen to protect against contaminants or insects. Passthrough window service opening shall be limited to 216 square inches. Obtain a self-closing window or air-curtain. Correct within 60 days.</p>
	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.			
Uten./Equip.	12	Spoils			
	13	Wash/ Sanitize			
	14	Equip. Condition			
Employee	15	Utensil Condition			
	16	Storage			
	17	Handwashing			
Water	18	Employee Hygiene			
	19	Employee Habits			
	20	Food Cert./ Card			
Waste	21	Water			
	22	Cross Con.			
Vermin	23	Liquid Waste			
	24	Refuse			
Facilities	25	Rodents/ Insects			
	26	Animal/ Fowl			
	27	Ventilation			
	28	Doors			
	29	Floors			
	30	Walls - Ceilings		X	
	31	Toilet Fac.			
Misc.	32	Janitorial Fac.			
	33	Lighting			
	34	Clothing - Linen			
	35	Signs			
	36	Misc.			

MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site	
Received By (Print): <b>Stella Brennan</b>	Received by (Signature): _____ Date: <b>4/15/2024</b>
REHS (Print): <b>Alexa Roche</b>	REHS (Signature): _____ Phone: <b>530-841-2112</b>

**Facility Name:** Higher Grounds Coffee

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

Received By (Print): Stella Brennan      Received by (Signature):      Date: 4/15/2024

REHS (Print): Alexa Roche      REHS (Signature):      Phone: 530-841-2112

**Facility Name:** Higher Grounds Coffee

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

Received By (Print): Stella Brennan      Received by (Signature):      Date: 4/15/2024

REHS (Print): Alexa Roche      REHS (Signature):      Phone: 530-841-2112

**Facility Name:** Higher Grounds Coffee

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

[Empty area for listing health code violations and correction details]

Received By (Print): Stella Brennan	Received by (Signature):	Date: 4/15/2024
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REHS (Print): Alexa Roche	REHS (Signature):	Phone: 530-841-2112
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