

## Food Program Official Inspection Report

SISKIYOU COUNTY
COMMUNITY DEVELOPMENT DEPARTMENT

Environmental Health Division 806 S. Main Street

Yreka, California 96097

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

Facility Name: Quigless General Store & R. V Park CMHC#					
17736 HWY 96 Klamath River					
Permi	t Ho	Jack	Wo	A	ON a Jennifer Patino Permit To Operate:  Usalid Not Valid
Phone	2:			-	E-mail: Jpgtub 130 comcast. NoT
Food	Safe	ety Certified Empl	loyee:	.1	enviter Pation Expiration Date: 2029
_		T	MAJ OU		
Protection Time/ Temp.	Ι,	Food Temp.	111111111111111111111111111111111111111	+	
	2	Prep./ Service		$\dagger$	Routive inspection conducted
	3	Storage/ Disp.	>		
	4	Frozen Food			This date
	5	Pure Food			
	6	Reused Food			
	7	Transportation			
Food Storage	8	Storage Fac.			3) observed vacuum sealer in Kitchen-
	9	Refrig. Units			
	10	Thermometer -			Reduced Oxygen Rackaging is Not
	11	Hazardous Mat.		T	
	12	Spoils			allowed with-out a HACCP plan.
Uten./Equip.	13	Wash/ Sanitize			
	14	Equip. Condition	X		Vacaum seder was removed during
	15	Utensil Condition			
	16	Storage			inspection
Employee	17	Handwashing			2
	18	Employee Hygiene			14) Soup warmer must be USF commercia
	19	Employee Habits		_	
	20	Food Cert./ Card		_	unit, Provide documentation or
Waste Water	21	Water	_	_	
	22	Cross Con.	$\perp$	_	replace with approved unit
	23	Liquid Waste	_	$\perp$	
	24	Refuse	$\perp$	_	
Vermir	25	Rodents/ Insects		+	
	26	Animal/ Fowl		1	
Facilities	27	Ventilation		+	
	28	Doors	$\perp$	+	
	$\vdash$	Floors		-	
	30	Walls - Ceilings		+	
	31	Toilet Fac.		_	
	32	Janitorial Fac.		+	
Misc.	33	Lighting		_	
	34	Clothing - Linen		-	
		Signs		-	
		Misc.	Im o		
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site  Received By (Print): Received by (Signature): 1 Date:					
Vilissa Reed Illossa Reed 11/06/24					
REHS (Print): David Fackson REHS (Signature):  Phone: \$30841-2114					