



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: Theory Coffee	Permit # 000979
Address: 228 N. Mt. Shasta Blvd., Mount Shasta, CA, 96067	
Permit Holder: Theory Collaborative, LLC	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: 703-943-8220	E-mail: hello@theorycoffee.com
Food Safety Certified Employee: Nicholas Clark	Expiration Date: 02/2027

		MAJ	OUT	COS		
					The marked items represent Health Code violations and must be corrected as follows:	
Protection Time/ Temp.	1	Food Temp.		X	X	<p style="text-align: center; margin: 0;">ROUTINE INSPECTION CONDUCTED THIS DATE.</p> <p>1) Observed multiple perishable half-gallon containers of Oat Milk stored on the ground of the food storage area. Milk was measured to be 57 degrees F. Hold all cold food at 41 degrees F or colder. Voluntarily discarded/removed.</p> <p>3) Observed the milk noted in the previous violation sitting on the ground of the food storage area. Store all food at least 6" off the ground. Corrected on Site.</p> <p>13) Observed the high temperature dish washing machine only reaching a sanitizing temperature of 149 degrees F. This was tested multiple times with the same results. The temperature gauge on the machine is reading 184 degrees F. This machine is required to reach a temperature that achieves a minimum surface temperature on wares of 160 degrees F. Discontinue using this dishwasher and manually wash, rinse, sanitize wares until repaired.</p> <p>14) Observed a countertop induction cook-top in use to prepare caramel and other toppings for pastries. This equipment is listed as NSF, but all cooking equipment that produces smoke, steam, heat, grease, or vapors is required to be operated under a Type 1 hood. This facility is only equipped with a Type 2 hood. Discontinue use and remove from the facility asap.</p> <p>14) Observed a domestic blender in use to prepare toppings for pastries. Utilize equipment that is commercial and is ANSI certified. Remove from the facility, asap.</p> <p>Submit manufacturer's specification sheets to this department for pre-approval review prior to installation into the facility. 2ND NOTICE</p> <p>16) Observed ice scoop stored on top of the ice machine. Store all utensils in a manner or location that is not going to expose them to contamination. The top of the ice machine is not cleaned frequently and is not an approved location for ice scoop storage. Recommend storing ice scoop in a container that is washed, rinsed, and sanitized daily. Correct asap.</p>
	2	Prep./ Service				
	3	Storage/ Disp.		X	X	
	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	Spills				
	13	Wash/ Sanitize		X		
	14	Equip. Condition		X		
Employee	15	Utensil Condition				
	16	Storage		X		
	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				
	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): Andie Witbeck	Received by (Signature): _____ Date: 09/26/2024
REHS (Print): Rick Florendo	REHS (Signature): _____ Phone: 530-841-2114

Facility Name: Theory 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): Andie Witbeck	Received by (Signature):	Date: 09/26/2024
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REHS (Print): Rick Florendo	REHS (Signature):	Phone: 530-841-2114
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