

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: Dollar Ge	neral	- We	ed		Permit #	000195		
Addres	SS:	20639 Bid Spr	ings	Rd, V	Veed	d CA 96094				
Permit Holder: Permit To Operate:										
Dhara	Dolgen of California, LLC									
Phone	Phone: 530-938-4237 E-mail:									
Food S	Food Safety Certified Employee: NA Expiration Date:									
			MAJ OUT COS			The marked items represent H	The marked items represent Health Code violations and must be corrected as follows:			
Protection Time/ Temp.	1	Food Temp.				COMPLAINT FOLLOW-U	JP ROUTINE INSPECTION CONDUC	CTED THIS DATE		
	2	Prep./ Service								
	3	Storage/ Disp.				Water has been res	estored, this facility is approved to reopen.			
	4	Frozen Food								
tion	5	Pure Food								
otec	6	Reused Food								
Pr	7	Transportation								
Food Storage	8	Storage Fac.								
	9	Refrig. Units	E6 35							
	10	Thermometer								
000	11	Hazardous Mat.								
ш	12	Spoils								
ip.	13	Wash/ Sanitize								
Uten./Equip.	14	Equip. Condition								
en./	15	Utensil Condition								
5	16	Storage								
Ф	17	Handwashing								
oye	18	Employee Hygiene								
Employee	19	Employee Habits								
	20	Food Cert./ Card								
Water		Water								
W	22	Cross Con.								
Waste	23	Liquid Waste								
W	24	Refuse								
Vermin		Rodents/ Insects								
Ver	26	Animal/ Fowl								
	27	Ventilation								
S	28	Doors								
Facilities	29	Floors								
Fac	30	Walls - Ceilings								
	31	Toilet Fac.								
	32	Janitorial Fac.								
	33	Lighting								
SC.	34	Clothing - Linen								
	35	Signs								
		Misc.								
MAJ = Major violation OUT = Out of compliance COS = Corrected on-site										
Received By (Print): Received by (Signature): Date: Aleta Williams 10/9/2024										
REHS (Print): REHS (Signature): Phone: Alexa Roche 530-841-2112							30-841-2112			

Facility Name:	Dollar General - Weed	
	The marked items represent Health Code violations and must be corrected as f	ollows:
Received By (Print):	Received by (Signature): leta Williams	Date: 10/9/2024
REHS (Print): Alexa Ro	REHS (Signature):	Phone: 530-841-2112

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REHS (Print):	REHS (Signature):	Phone:

530-841-2112

Alexa Roche

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