



# 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>Liquor Warehouse</b>	Permit # <b>000088</b>
Address: <b>420 Alamo Ave, Weed CA 96094</b>	
Permit Holder: <b>Kartar Singh</b>	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: <b>530-216-0511</b>	E-mail:
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.			
	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.			
	12	Spoils			
Uten./Equip.	13	Wash/ Sanitize			
	14	Equip. Condition		X	
	15	Utensil Condition			
Employee	16	Storage			
	17	Handwashing		X	X
	18	Employee Hygiene			
	19	Employee Habits			
Water	20	Food Cert./ Card			
	21	Water			
Waste	22	Cross Con.			
	23	Liquid Waste			
Vermin	24	Refuse			
	25	Rodents/ Insects			
Facilities	26	Animal/ Fowl			
	27	Ventilation			
	28	Doors			
	29	Floors			
	30	Walls - Ceilings			
	31	Toilet Fac.			
	32	Janitorial Fac.			
Misc.	33	Lighting			
	34	Clothing - Linen			
	35	Signs			
	36	Misc.			

**ROUTINE INSPECTION CONDUCTED ON THIS DATE**

29) Observed floors in the walk-in refrigerator having build up of debris and food. Clean immediately.

16) Observed broken kitchen equipment and household-use only items throughout the entire facility. The food facility shall be free of all items that are unnecessary to the operation of 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.

31) 7TH NOTICE: Fan in restroom is non-operational and continues to not have been repaired since the previous inspection.

**REINSPECTION FEE ASSESSED FOR CONTINUOUS NON-COMPLIANCE.**

MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site	
Received By (Print): <b>Vicky Kumar</b>	Received by (Signature): _____
	Date: <b>10/30/2024</b>
REHS (Print): <b>Alexa Roche</b>	REHS (Signature): _____
	Phone: <b>530-841-2117</b>

**Facility Name:** Liquor Warehouse

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

Received By (Print):  
Vicky Kumar

Received by (Signature):

Date:  
10/30/2024

REHS (Print):  
Alexa Roche

REHS (Signature):

Phone:  
530-841-2117

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