## 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: Lily's Restaurant 000301										
Address: 1013 S. Mount Shasta Blvd., Mount Shasta, CA, 96067										
Permit Holder: Permit To Operate:										
		Jon Herfine	dahl			🗙 Valid 📃 Not Valid				
Phone: 530-926-3372 E-mail: jdherf@yahoo.com										
Food Safety Certified Employee: Jon Herfindahl Expiration Date: 05/2023										
	MAJ OUT COS					The marked items represent Health Code violations and must be corrected as follows:				
Protection Time/ Temp.	1	Food Temp.		Х	×					
	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED THIS DATE				
	3	Storage/ Disp.		Х	×	1) Observed surface temperature of wisp eggs, mushroom, and salads at 52F at				
	4	Frozen Food				breakfast deli cooler. Observed sliced cheese at 52F at the back deli prep cooler. Hold				
ction	5	Pure Food		а.		all cold foods at 41 degrees F or colder. Dairy may be held at 45 degrees F or colder.				
Protec	6	Reused Food				Food moved to a working refrigeration unit or voluntarily discarded onsite.				
	7	Transportation				1) Observed gravy and hollandaise sauce at 82F stored in large bulk containers in the				
0	8	Storage Fac.				walk-in cooler in the kitchen. Ensure foods are rapidly cooled from 135F to 70F with				
orag	9	Refrig. Units	-10 - 10 			2hrs, then to 41F within the next 4hrs. Utilize one or more rapid cooling methods:				
Food Storage	10	Thermometer		-		in a shallow pan, separating food into smaller/thinner portion, using rapid cooling				
000	11	Hazardous Mat.		×	X	devices, using ice paddles, using ice as an ingredient, inserting containers in an ice bath				
ш	12	Spoils			6	and stirring frequently. Voluntarily discarded.				
Uten./Equip.	13	Wash/ Sanitize		X	0	2) Observed raw meats and fish stored next to or above ready to eat foods at the				
	14	Equip. Condition			-	following location: deli cooler at preps line, kitchen walk-in cooler, stand-up box freeze				
	15	Utensil Condition				at dry storage. Store ready to eat/fully cooked food above or on separate shelf from raw				
	16	Storage				food. Corrected on site.				
Θ	100	Handwashing				11) Observed chemicals stored above clean equipment at the warewashing area. Store				
Employee	18	Employee Hygiene			-	chemicals below clean equipment to prevent cross contamination. Corrected onsite.				
du	_	Employee Habits								
	20	Food Cert./ Card				13) Observed less than 100ppm quat sanitizer in sani-buckets at the food prep area.				
Water	-	Water				Ensure sani-buckets hold sanitizer solution of 200ppm quat. Utilize test strips before use				
		Cross Con.				and at least every 2hrs or as needed.				
Waste	_	Liquid Waste				14) Observed Household Use Only Cuisinart food processor and KitchenAid mixer.				
		Refuse				Utilize ANSI certified and commercial equipment. Discontinue use, remove, and replace				
Vermin	-	Rodents/ Insects				with ANSI equipment. Submit manufacturer spec sheets to department for pre-approval				
Ve	1 1	Animal/ Fowl	_	2		prior to purchase and installation.				
	-	Ventilation				20) Food safety manager certificate has expired. Obtain certificate within 60 days. Mary				
es	-	Doors		-	8	Herfindahl has scheduled in-person class for February.				
Facilities	- Martine -	Floors								
Fa	30	Walls - Ceilings				29) Observed grease and food buildup below cooking equipment, exhaust hood, filter,				
		Toilet Fac.				ansul system, meat slicer, food processor, blender, and hard-to-reach places at the				
	32	Janitorial Fac.			2	cooks' station. Maintain equipment in cleanly manner and fully serviceable. Wash, clean, and sanitize immediately.				
	-	Lighting								
Misc.	-	Clothing - Linen		_						
		Signs		<u> </u>						
MAL		Misc. or violation		Out	of cor	unligned COS - Corrected on site				
			- 10/	Out		pliance COS = Corrected on-site Received by (Signature): Date:				
Received By (Print): Received by (Signature): Date: 12/18/2024										
REHS (Print): REHS (Signature): Phone: 530-841-2112										

Facility Name: Lily			
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Fabian	Avila	12/18/2	024
REHS (Print):	REHS (Signature):	Phone:	
Chalyn Dewe	y.	530-841-2	112
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Page 3		000 071-2112					

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