



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: North Siskiyou Dairy Truck #1	Permit # 000361
Address: 1313 N Foothill, Yreka CA 96097	
Permit Holder: DD&C DBA Siskiyou Distributing	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: 530-842-1616	E-mail: mark@siskiyoudistributing.com
Food Safety Certified Employee: N/A	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			
	15	Utensil Condition			
	16	Storage			
Employee	17	Handwashing			
	18	Employee Hygiene			
	19	Employee Habits			
	20	Food Cert./ Card			
Water	21	Water			
	22	Cross Con.			
Waste	23	Liquid Waste			
	24	Refuse			
Vermin	25	Rodents/ Insects			
	26	Animal/ Fowl			
Facilities	27	Ventilation			
	28	Doors			
	29	Floors		X	
	30	Walls - Ceilings		X	
	31	Toilet Fac.			
	32	Janitorial Fac.			
	33	Lighting			
Misc.	34	Clothing - Linen			
	35	Signs			
	36	Misc.			

ROUTINE INSPECTION CONDUCTED THIS DATE

29) Observed the floors with holes and finishes is starting to rusting. Ensure floors are finished to be easily cleanable, durable, nonabsorbent, smooth. Repair or correct within 180 days.

30) Observed the paint on the ceiling chipping/peeling. Ensure ceiling is finished to be easily cleanable, durable, nonabsorbent, smooth. Repair or correct within 180 days.

NOTE: Dairy truck is currently not in operation, until the end of May 2025.

MAJ = Major violation OUT = Out of compliance COS = Corrected on-site	
Received By (Print): Kris Zeigler	Received by (Signature): _____
	Date: 12/19/2024
REHS (Print): Chalyn Dewey	REHS (Signature): _____
	Phone: 530-841-2112

Facility Name: North Siskiyou Dairy Truck #1

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

Received By (Print):
Kris Zeigler

Received by (Signature):

Date:
12/19/2024

REHS (Print):
Chalyn Dewey

REHS (Signature):

Phone:
530-841-2112

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