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: White Mountain Cafe 000481							^{Permit #} 000481			
Addre	SS:	243 Main St.,	4/17/17/280			96057				
Permit Holder: Brian and Diane Kirby										
Phone	5	530-945-0499				E-mail: kirbywmc@gmail.com				
Food	Safe	ty Certified Emplo	yee: F	Brian	Kirh	y CC	Expiration Date: 02/2029			
			MAJ		COS	The marked items represent Health Code violatio				
~	1									
Protection Time/ Temp.	2	Prep./ Service		X	×	ROUTINE INSPECTION CONDUCT	ED THIS DATE			
	3	Storage/ Disp.		Х	X	1) Observed hollandaise sauce with a surface ter	mperature of 115F and center			
	4	Frozen Food				temperature at 128F store in hot holder at cooks				
	5	Pure Food				sitting in ambient air on the deli-prep table. Hold hot foods at 135F or hotter a				
	6	Reused Food				foods at 41F or colder. Voluntarily discarded.				
P	7	Transportation				1,9) Observed numerous cold foods stored at both deli-prep coolers between				
a)	8	Storage Fac.				Observed the deli coolers not holding food to tem				
orag	9	Refrig. Units	1 44 20 			below. Maintain equipment in good repair and full				
Food Storage	10	Thermometer		6		90 days.				
000	11	Hazardous Mat.				1) Observed active analysis on the part table at 10	CC Departies remaind a poliner of founds			
ш	12	Spoils				1) Observed soup cooling on the prep table at 10 using one or more of the approved methods: place				
Uten./Equip.	13	Wash/ Sanitize		X	÷	into smaller/thinner portion, using rapid cooling de				
	14	Equip. Condition		X		an ingredient, inserting containers in an ice bath				
ten.	15	Utensil Condition				into smaller portion and stored in walk-in refrigera	ator.			
ŭ	16	Storage			-					
e	17	Handwashing		Х		 Observed raw meat patties thawing on the prep cooler countertop. Thaw r prep sink in cold (70F or below) running water for no more than 2hrs or utilize 				
loye		Employee Hygiene				approved thawing methods: in the microwave the				
Employee	-	Employee Habits		3	2	refrigerator or part of the cooking process. Food r				
	0.000	Food Cert./ Card								
Water	-	Water	-			3) Observed coffee scoop stored on the coffee filters in front food prep area. scoop in food container with handle above the food. Scoop washed, sanitized				
3				2		stored in container during inspection.	od. Scoop wasned, sanitized, and			
Waste		Liquid Waste	-							
3	· · · · ·	Refuse		2		3) Observed raw eggs stored next-to or above ready-to-eat foods. Store				
Vermin	-	Rodents/ Insects	-			below and on separate shelf from ready-to-eat foods. Corrected onsite.				
Ve		Animal/ Fowl	-	-	8	17) Observed no single-use paper towels at handwash station in the	tweeh station in the women restreem			
	27	Ventilation				and front service area. Observed no pump soap i				
ies	28	Doors		~	0	handwash station are constantly supplied with ha				
Facilities	0.000	Floors		×	_	dispenser and hot water. Paper towels restocked.				
ш		Walls - Ceilings	-		-	10) Observed as a set in the server of O				
	31 32	Toilet Fac.				13) Observed no sani-bucket in the prep area. Observed 0ppm quat sanitize prep area sani-bucket. Ensure sani-buckets holds a sanitizer solution of 200 100ppm chlorine.				
	1.	Janitorial Fac.	-	1	-					
Misc.		Lighting Clothing - Linen				Page 1 of 2				
	2	Signs	-							
			-							
36 Misc. MAJ = Major violation OUT = Out of compliance COS = Corrected on-site										
		y (Print): Brian K				Received by (Signature):	Date: 12/20/2024			
REHS (Print): REHS (Signature): Phone: 530-841-2112										

Last modified 4/12/2023

Facility Name: White Mountain Cafe

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

13) Observed no test strips to measure disinfectant concentration. Obtain test strips immediately.

13) Observed numerous multi-use wash cloths stored on the countertops in the prep area. Store wash cloths in sanibucket with sanitizer solution of either 200ppm quat or 100ppm chlorine.

14) Observed a Household Use Only KitchenAid mixer. Utilize ANSI certified and commercial equipment only. Discontinue use, remove, and replace immediately. Submit manufacturer spec sheet of new replaced equipment to department for pre-approval prior to purchase and installation. Email spec sheet to: rflorendo@co.siskiyou.ca.us or cdewey@co.siskiyou.ca.us

14) Observed the prep sink plumbed into the floor sink without a 1" air gap. Ensure this unit is plumbed with a 1" air gap above the top of the floor sink. Repair or correct within 30 days.

29) Observed food and grease buildup on the floors, equipment, below the equipment and hard-to-reach places throughout the food prep area. Ensure floors and equipment are clean and fully serviceable. Wash, clean, and sanitize immediately.

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Received By (Print):	Received by (Signature):	Date:
Brian Kirby		12/20/2024
REHS (Print):	REHS (Signature):	Phone:
Chalyn Dewey		530-841-2112

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	n Kirby		12/20/2024					
REHS (Print): Chalyn	RE	HS (Signature):	Phone: 530-841-2112					
Page 3	,		JJU-041-2112					

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REHS (Print):	REHS (Si	gnature):	Phone:
Chalyn I	Dewey	~ ,	530-841-2112
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