



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

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| Facility Name: Kentucky Fried Chicken | Permit # 000282 |
| Address: 1293 S Main Street, Yreka, CA 96097 | |
| Permit Holder: Declerck Enterprises | Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid |
| Phone: 530-842-5577 | E-mail: D118002@yum.com |
| Food Safety Certified Employee: Nicole McNew | Expiration Date: 08/2028 |

| | | MAJ | OUT | COS | | |
|-----------------------|----|-------------------|-----|-----|---|--|
| | | | | | The marked items represent Health Code violations and must be corrected as follows: | |
| Protection Time/Temp. | 1 | Food Temp. | | X | X | <p style="text-align: center; margin: 0;">ROUTINE INSPECTION CONDUCTED THIS DATE</p> <p>1) Observed mashed potatoes and corns with a surface temperature of 120F in hot holder. Ensure all parts of hot foods are held at 135F or above. Voluntarily discarded.</p> <p>9) Observed ice buildup on condenser pipes and its unit in the exterior walk-in freezer. Ensure equipment is maintained in good repair and fully serviceable. Remove all food underneath ice build-up immediately. Repair or correct within 90 days.</p> <p>9, 14) Observed dried blood buildup on the interior door and buildup of food and flour on food storage racks in the poultry walk-in cooler. Maintain unit in a clean manner, free of buildup or contaminants. Wash, clean, and sanitize ASAP.</p> <p>13) Observed 100ppm quat sanitizer in sani-bucket in the front. Ensure sanitizer holds concentration solution of 200ppm quat. Corrected during inspection.</p> <p>29) 3RD NOTICE - Observed food, flour, and liquid buildup in floor areas with damaged or missing grout in the kitchen. Facility has repaired numerous damaged tiles in this area. Maintain floors to be smooth, easily cleanable, durable, and nonabsorbent. Repair or correct within 90 days.</p> <p>29) Observed liquid pooling around the lip of the floor sink below the ice machine. Ensure waste drips into the floor sink and not the floor. Repair or correct within 90 days.</p> <p>14, 29) Observed grease buildup on and below the equipment and the floors at the cooking station. Maintain equipment and floors in a cleanly manner and fully operable. Wash and clean immediately.</p> <p>36) 3RD NOTICE - Observed no air-curtain at the pass-thru window. Pass thru windows 432 sq. in. must be equipped with an air-curtain. Install an air-curtain within 30 days. Facility has purchased equipment and installation scheduled on 01/24/2025.</p> <p>A REINSPECTION FEE ASSESSED FOR NON-COMPLIANCE. A REINSPECTION FEE WILL BE ASSESSED FOR FUTURE NON-COMPLIANCE.</p> <p>NOTE: 1) Facility provided protocol for chicken brooding. Per protocol, used chicken brooding are to be stored in ambient temperature overnight. 2) Facility has repaired roof leak in food prep, women restroom and restroom hallway. Currently no active leak. Ceiling in food prep area has evidence of liquid pooling after repair.</p> |
| | 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 | | X | | |
| | 10 | Thermometer | | | | |
| | 11 | Hazardous Mat. | | | | |
| Uten./Equip. | 12 | Spoils | | | | |
| | 13 | Wash/ Sanitize | | X | | |
| | 14 | Equip. Condition | | X | | |
| Employee | 15 | Utensil Condition | | | | |
| | 16 | Storage | | | | |
| | 17 | Handwashing | | | | |
| Water | 18 | Employee Hygiene | | | | |
| | 19 | Employee Habits | | | | |
| | 20 | Food Cert./ Card | | | | |
| Waste | 21 | Water | | | | |
| | 22 | Cross Con. | | | | |
| Vermin | 23 | Liquid Waste | | | | |
| | 24 | Refuse | | | | |
| Facilities | 25 | Rodents/ Insects | | | | |
| | 26 | Animal/ Fowl | | | | |
| | 27 | Ventilation | | | | |
| | 28 | Doors | | | | |
| | 29 | Floors | | X | | |
| | 30 | Walls - Ceilings | | | | |
| Misc. | 31 | Toilet Fac. | | | | |
| | 32 | Janitorial Fac. | | | | |
| | 33 | Lighting | | | | |
| | 34 | Clothing - Linen | | | | |
| | 35 | Signs | | | | |
| | 36 | Misc. | | X | | |

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|---|--|
| MAJ = Major violation OUT = Out of compliance COS = Corrected on-site | |
| Received By (Print): Nicole McNew | Received by (Signature): _____ Date: 01/07/2025 |
| REHS (Print): Chalyn Dewey | REHS (Signature): _____ Phone: 530-841-2112 |

Facility Name: Kentucky Fried Chicken

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

[Empty area for listing health code violations and correction details]

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