## **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: Subway- Miner's Street Permit # 000443										
Address: 113 E Miner St, Yreka CA 96097										
Permit Holder:Permit To Operate:										
Mehar Subs Inc./Sikander Virk										
Phone: 530-643-8032 E-mail: sikandervirk1989@gmail.com										
Food Safety Certified Employee: Armaan S. Sandhu Expiration Date: 11/2029										
			_	OUT	_	The marked items represent Health Code violations and must be corrected as follows:				
Protection Time/ Temp.	1	Food Temp.		X	X	DOLITIME IMPRECTION COMPLICTED THIS DATE				
	2	Prep./ Service		X	X	ROUTINE INSPECTION CONDUCTED THIS DATE				
	3	Storage/ Disp.				1) Observed numerous deli meats and cheese measuring at 47-50F at deli prep cooler. Observed chopped lettuce and sliced cucumbers at 52F at vegetable prep cooler. Hold				
	4	Frozen Food								
ctior	5	Pure Food				cold foods at 41F or below. Keep deli-prep lid close when not in use to rapidly cool food				
Protec		Reused Food				and avoid over stacking ingredients. Corrected during inspection & voluntarily discarde				
	7	Transportation				1, 2) 2ND NOTICE - Observed meats thawing on the prep sink counter in ambient air.				
ge		Storage Fac.	- 25			Steaks and cubed chicken temp at 64F and meatballs at 77F. Again, hold cold foods at				
oraç	American Co.	Refrig. Units				41F or colder. Utilize one of the following approved thawing methods: in refrigerator, in				
Food Storage	3 3	Thermometer			8	running water at or below 70F for a period not to exceed 2 hours, in microwave and				
Foo	come	Hazardous Mat.				immediately prepared, and as part of the cooking process. Voluntarily discarded.				
0.000	8 8	Spoils		V		13) Observed 10ppm chlorine in green sani-bucket located at vegetable cooler prep				
din.	J. 1919.0	Wash/ Sanitize		X	×	station. Ensure sanitizer has a solution of 100ppm chlorine. Corrected onsite.				
ı.Æ		Equip. Condition		X	7	14) Observed a man hanging an man/bream halder with man hand stared on the ground				
Uten./Equip.	_	Utensil Condition				14) Observed a mop hanging on mop/broom holder with mop head stored on the ground in front walk-in freezer. After use, ensure mop is placed in a position that allows the mop				
		Storage			-	head to air dry without soiling walls, equipment, or supplies. Corrected onsite.				
99/		Handwashing Employee Hygiene				The state of the s				
Employee		Employee Habits				20) Current listed food safety manager/professional is no longer employed at the facility.				
Em		Food Cert./ Card		×		Obtain a new food safety professional certificate within 60 days & maintain a copy of certificate on site. Provided Tamy Howerton's (food safety instructor) business card.				
er	7	Water		, ,		certificate off site. I rovided Tarry Flowerton's (food safety instructor) business card.				
Water	22	Cross Con.				20) 4TH NOTICE - Observed numerous employees without food handler certificates.				
ste	23	Liquid Waste				Ensure all employees obtain a food handler card within 30 days (of hire) & maintain a				
Waste	24	Refuse				copy of cards onsite.				
Vermin	25	Rodents/ Insects				36) Observed an insect zapper stored on the soda machine counter, behind single-use				
Ver	26	Animal/ Fowl				utensils. Install insect devices in locations as to not be over food or utensil handling area				
	27	Ventilation				, clean equipment, linens, and unwrapped single-use articles. Correct or remove AS				
S	28	Doors				29) Observed buildup of food, dirt, and/or dust on the floors and hard-to-reach places				
Facilities	29	Floors		X		throughout the facility, especially back storage area and walk-in units. Maintain facility in				
Fa	30	Walls - Ceilings				a clean manner at all times. Wash and clean immediately.				
	31	Toilet Fac.				A DEINORECTION FEE ACCESSED FOR REPEAT NON COMPLIANCE				
		Janitorial Fac.			-	A REINSPECTION FEE ASSESSED FOR REPEAT NON-COMPLIANCE. A REINSPECTION FEE WILL BE ASSESSED ON FUTURE REPEAT NON-				
Misc.		Lighting				COMPLIANCE.				
		Clothing - Linen				CONTRIBUTOR.				
		Signs	Н	.,						
MA I -		Misc. or violation C	ILT -	X Out (	of com	ppliance COS = Corrected on-site				
		y (Print):	101 -	Out (	JI CUII	Received by (Signature):  Date:				
Diljot Kaur 01/16/2025										
REHS (Print):  Chalyn Dewey  REHS (Signature):  Phone: 530-841-2112										

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	The marked items represent Health Code violations and must be corrected as follows	3:
Received By (Print):	Received by (Signature):	Date:
Dil	ljot Kaur	01/16/2025
REHS (Print): Chalyn D	REHS (Signature):	Phone: 530-841-2112
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