



RETAIL FOOD FACILITY INSPECTION REPORT

DBA: Live Oak Middle School Permit Holder: _____
 Address: 2002 Pennington City: Live Oak Zip: 95953 Phone: _____
 Computer #: 2037

- Initial Ongoing Re-inspection Complaint Complaint Re-inspection Consultation Construction Change of Ownership

Unmarked Items = In Compliance, Not observed, or Not Applicable
 COS = Corrected on Site MAJ = Major Violation MIN = Minor Violation (see reverse side for California code section)

Major violations pose a threat to public health and must be corrected immediately. Non-compliance may warrant closure of the food facility.

RISK FACTOR INTERVENTIONS				APPROVED RETAIL PRACTICES				
DEMONSTRATION OF KNOWLEDGE				SUPERVISION				
	COS	MAJ	MIN				MIN	
1. Demonstration of knowledge; food safety certification				24. Person in charge present and performs duties				
Food Safety Cert Name: <u>Pamela Vaughn</u> Exp. Date: <u>6/2010</u>				PERSONAL CLEANLINESS				
EMPLOYEE HEALTH & HYGIENIC PRACTICES				GENERAL FOOD SAFETY REQUIREMENTS				
2. Communicable disease; reporting, restrictions & exclusions				25. Personal cleanliness and hair restraints				
3. No discharge from eyes, nose, or mouth; no open wounds				26. Approved thawing methods used, frozen food				
4. Proper eating, tasting, drinking or tobacco use				27. Food separated and protected				
PREVENTING CONTAMINATION BY HANDS				28. Washing fruits and vegetables				
5. Hands clean and properly washed; gloves used properly				29. Toxic substances properly identified, stored, used				
6. Adequate handwashing facilities supplied & accessible				FOOD STORAGE/DISPLAY/SERVICE				
TIME AND TEMPERATURE RELATIONSHIPS				30. Food storage; food storage containers identified				
7. Proper hot and cold holding temperatures				31. Consumer self-service				
8. Time as a public health control; procedures & records				32. Food properly labeled & honestly presented				
9. Proper cooling methods				EQUIPMENT/UTENSILS/LINENS				
10. Proper cooking time & temperatures				33. Nonfood contact surfaces clean				
11. Proper reheating procedures for hot holding				34. Warewashing facilities: installed, maintained, used; test strips				
PROTECTION FROM CONTAMINATION				35. Equipment/Utensils approved; installed; clean; good repair, capacity				
12. Returned and reserve of food				36. Equipment, utensils and linens: storage and use				
13. Food in good condition: safe and unadulterated				37. Vending machines				
14a. Food contact surfaces: clean and sanitized				38. Adequate ventilation and lighting; designated areas, use				
14b. Proper warewashing and sanitizing procedures				39. Thermometers provided and accurate				
Sanitizer Type: <input type="checkbox"/> Chlorine <input type="checkbox"/> Quaternary Ammonia <input type="checkbox"/> Hot Water <input type="checkbox"/> Other				40. Wiping cloths: properly used and stored				
Sanitizer Concentration (ppm):				Sanitizer Type: <input type="checkbox"/> Chlorine <input type="checkbox"/> Quaternary Ammonia				
Sanitizer Concentration (ppm):				Sanitizer Concentration (ppm):				
FOOD FROM APPROVED SOURCES				PHYSICAL FACILITIES				
15. Food obtained from approved source				41. Plumbing: proper backflow devices				
16. Compliance with shellstock tags, condition, display				42. Garbage and refuse properly disposed; facilities maintained				
17. Compliance with Gulf oyster regulations				43. Toilet facilities: properly constructed, supplied, cleaned				
CONFORMANCE WITH APPROVED PROCEDURES				44a. Premises kept free of debris and unnecessary equipment				
18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan				44b. Appropriate use of equipment				
CONSUMER ADVISORY				44c. Janitorial area, provided maintained, and kept clean				
19. Raw, undercooked, and confectionary containing alcohol foods				44d. Employee personal items stored in approved location				
HIGHLY SUSCEPTIBLE POPULATIONS				44e. Facility is equipped to prevent vermin entrance/harborage				
20. Licensed health care facilities/public & private schools, prohibited foods not offered				PERMANENT FOOD FACILITIES				
WATER/HOT WATER				45. Floor walls and ceilings: built, maintained, and clean				
21. Hot and cold water available				46. No unapproved private homes/living or sleeping quarters				
Ware Sink Temp _____ °F Hand Sink Temp _____ °F				SIGNS/REQUIREMENTS				
LIQUID WASTE DISPOSAL				47. Signs posted; last inspection report available				
22. Sewage and wastewater properly disposed				COMPLIANCE & ENFORCEMENT				
VERMIN				48. Plan Review				
23. No rodents, insects, birds, or animals				49. Permits Available				
				50. Impoundment				
				51. Permit Suspension				
				52. Other				
				NON-PERMANENT FOOD FACILITIES				
				53. Mobile Food Facilities				
				54. Temporary Food Facilities				

Owner/Operator: P. Vaughn Title: _____

REHS: [Signature]

