



SUTTER COUNTY ENVIRONMENTAL HEALTH DIVISION
 COMMUNITY SERVICES DEPARTMENT
 1130 Civic Center Boulevard, Suite A
 Yuba City, CA 95993
 Ph# (530) 822-7400 Fax# (530) 822-7109

Date 4/2/13
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RETAIL FOOD FACILITY INSPECTION REPORT

DBA: Food Maxx Permit Holder: _____
 Address: 1232 Colusa Avenue city: Yuba City Zip: 95991 Phone: 671-4612
 Computer #: 2097

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 | COS | MAJ | MIN |
|---|-----|-----|-----|
| 1. Demonstration of knowledge; food safety certification | | | |
| Food Safety Cert Name: <u>Ray Oberlin</u> Exp. Date: <u>2/20/13</u> | | | |
| EMPLOYEE HEALTH & HYGIENIC PRACTICES | | | |
| 2. Communicable disease; reporting, restrictions & exclusions | | | |
| 3. No discharge from eyes, nose, or mouth; no open wounds | | | |
| 4. Proper eating, tasting, drinking or tobacco use | | | |
| PREVENTING CONTAMINATION BY HANDS | | | |
| 5. Hands clean and properly washed; gloves used properly | | | |
| 6. Adequate handwashing facilities supplied & accessible | | | |
| TIME AND TEMPERATURE RELATIONSHIPS | | | |
| 7. Proper hot and cold holding temperatures | | | |
| 8. Time as a public health control; procedures & records | | | |
| 9. Proper cooling methods | | | |
| 10. Proper cooking time & temperatures | | | |
| 11. Proper reheating procedures for hot holding | | | |
| PROTECTION FROM CONTAMINATION | | | |
| 12. Returned and reservice of food | | | |
| 13. Food in good condition: safe and unadulterated | | | |
| 14a. Food contact surfaces: clean and sanitized | | | |
| 14b. Proper warewashing and sanitizing procedures | | | |
| Sanitizer Type: <input type="checkbox"/> Chlorine <input type="checkbox"/> Quaternary Ammonia <input type="checkbox"/> Hot Water <input type="checkbox"/> Other | | | |
| Sanitizer Concentration (ppm): | | | |
| FOOD FROM APPROVED SOURCES | | | |
| 15. Food obtained from approved source | | | |
| 16. Compliance with shellstock tags, condition, display | | | |
| 17. Compliance with Gulf oyster regulations | | | |
| CONFORMANCE WITH APPROVED PROCEDURES | | | |
| 18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan | | | |
| CONSUMER ADVISORY | | | |
| 19. Raw, undercooked, and confectionary containing alcohol foods | | | |
| HIGHLY SUSCEPTIBLE POPULATIONS | | | |
| 20. Licensed health care facilities/public & private schools; prohibited foods not offered | | | |
| WATER/HOT WATER | | | |
| 21. Hot and cold water available | | | |
| Ware Sink Temp _____ °F Hand Sink Temp _____ °F | | | |
| LIQUID WASTE DISPOSAL | | | |
| 22. Sewage and wastewater properly disposed | | | |
| VERMIN | | | |
| 23. No rodents, insects, birds, or animals | | | |

| SUPERVISION | MIN |
|---|-------------------------------------|
| 24. Person in charge present and performs duties | |
| PERSONAL CLEANLINESS | |
| 25. Personal cleanliness and hair restraints | |
| GENERAL FOOD SAFETY REQUIREMENTS | |
| 26. Approved thawing methods used, frozen food | |
| 27. Food separated and protected | |
| 28. Washing fruits and vegetables | |
| 29. Toxic substances properly identified, stored, used | |
| FOOD STORAGE/DISPLAY/SERVICE | |
| 30. Food storage; food storage containers identified | |
| 31. Consumer self-service | <input checked="" type="checkbox"/> |
| 32. Food properly labeled & honestly presented | |
| EQUIPMENT/UTENSILS/LINENS | |
| 33. Nonfood contact surfaces clean | |
| 34. Warewashing facilities: installed, maintained, used; test strips | |
| 35. Equipment/utensils approved; installed; clean; good repair, capacity | |
| 36. Equipment, utensils and linens: storage and use | |
| 37. Vending machines | |
| 38. Adequate ventilation and lighting; designated areas, use | |
| 39. Thermometers provided and accurate | |
| 40. Wiping cloths: properly used and stored | |
| Sanitizer Type: <input type="checkbox"/> Chlorine <input type="checkbox"/> Quaternary Ammonia | |
| Sanitizer Concentration (ppm): | |
| PHYSICAL FACILITIES | |
| 41. Plumbing: proper backflow devices | |
| 42. Garbage and refuse properly disposed; facilities maintained | |
| 43. Toilet facilities: properly constructed, supplied, cleaned | |
| 44a. Premises kept free of debris and unnecessary equipment | |
| 44b. Appropriate use of equipment | |
| 44c. Janitorial area, provided maintained, and kept clean | |
| 44d. Employee personal items stored in approved location | |
| 44e. Facility is equipped to prevent vermin entrance/harborage | |
| PERMANENT FOOD FACILITIES | |
| 45. Floor walls and ceilings: built, maintained, and clean | <input checked="" type="checkbox"/> |
| 46. No unapproved private homes/living or sleeping quarters | |
| SIGNS/REQUIREMENTS | |
| 47. Signs posted; last inspection report available | |
| COMPLIANCE & ENFORCEMENT | |
| 48. Plan Review | |
| 49. Permits Available <u>11/30/13</u> | |
| 50. Impoundment | |
| 51. Permit Suspension | |
| 52. Other | |
| NON-PERMANENT FOOD FACILITIES | |
| 53. Mobile Food Facilities | |
| 54. Temporary Food Facilities | |

Owner/Operator: Ray Oberlin Title: Food Manager REHS: [Signature]
 Form Updated 01/20/10



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| ITEM/LOCATION | TEMP. | ITEM/LOCATION | TEMP. |
|----------------------|-------|-----------------------|-------|
| produce (greens) | 40° | Meat Case (raw) | 35+ |
| Juice/Coffee creamer | 42° | Hot holding (chicken) | 201° |
| True Reach (Flan) | 35° | Hot Dog Case | 32° |
| Deli Case | 40° | True Cheese Reach | 40° |

OBSERVATIONS AND CORRECTIVE ACTIONS

Provide covered bins for bulk beans
 Salad 44°
 Floor Sausage/hot case - 33.1°/East Side 39°
 Cheese - 28°
 Dairy - walk-in 43°
 Eggs - 20°
 Ice on meat freezer floor - clean floor -
 Meat Walk in - 38.8°
 Wrapper Meat 20°
 Vinegar shelf is dirty - clean
 Cake case - 40°
 Proofing walk in 40°
 Ice on bakery freezer floor - Clean slipping hazard

Owner/Operator: Roy Clark Title: Store Manager REHS: Schiffers