

Re-inspection on cleaning on 2 weeks.



SUTTER COUNTY ENVIRONMENTAL HEALTH DIVISION
 DEVELOPMENT SERVICES DEPARTMENT
 1130 Civic Center Boulevard, Suite A
 Yuba City, CA 95993
 Ph# (530) 822-7400 Fax# (530) 822-7220

Date 11-29-16

Page 1 of ____

RETAIL FOOD FACILITY INSPECTION REPORT

DBA: Fresh Donuts Permit Holder: Sarem Bon
 Address: 658 Gray City: YC Zip: _____ Phone: 755-1226
 Computer #: _____

Initial Routine 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 | | | |
|---|-----|-----|-----|
| | COS | MAJ | MIN |
| DEMONSTRATION OF KNOWLEDGE | | | |
| 1. Demonstration of knowledge; food safety certification | | | X |
| Food Safety Cert Name: <u>Not available</u> Exp. Date: _____ | | | |
| EMPLOYEE HEALTH & HYGIENIC PRACTICES | | | |
| 2. Communicable disease; reporting, restrictions & exclusion | | | |
| 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 | | | X |
| 14a. Food contact surfaces: clean and sanitized | | | X |
| 14b. Proper warewashing and sanitizing procedures | | | X |
| 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 | | | |
| 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 | | | X |

| APPROVED RETAIL PRACTICES | |
|---|-----|
| | MIN |
| SUPERVISION | |
| 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 | |
| 32. Food properly labeled & honestly presented | |
| EQUIPMENT/UTENSILS/LINENS | |
| 33. Nonfood contact surfaces clean | |
| 34. Warewashing facilities: installed, maintained, used; test strips | X |
| 35. Equipment/Utensils approved; installed; clean; good repair, capacity | X |
| 36. Equipment, utensils and linens: storage and use | X |
| 37. Vending machines | |
| 38. Adequate ventilation and lighting; designated areas, use | X |
| 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 | X |
| 42. Garbage and refuse properly disposed; facilities maintained | X |
| 43. Toilet facilities: properly constructed, supplied, cleaned | X |
| 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 | X |
| 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 | |
| 50. Impoundment | |
| 51. Permit Suspension | |
| 52. Other | |
| NON-PERMANENT FOOD FACILITIES | |
| 53. Mobile Food Facilities | |
| 54. Temporary Food Facilities | |

Owner/Operator: [Signature] Title: owner

REHS: [Signature]



SUTTER COUNTY ENVIRONMENTAL HEALTH DIVISION
 DEVELOPMENT SERVICES DEPARTMENT
 1130 Civic Center Boulevard, Suite A
 Yuba City, CA 95993
 Ph# (530) 822-7400 Fax# (530) 822-7220

Date 11-29-16
 Page 2 of 4

RETAIL FOOD FACILITY INSPECTION REPORT

DBA: Fresh Donuts Permit Holder: _____
 Address: _____ City: _____ Zip: _____ Phone: _____

| ITEM/LOCATION | TEMP | ITEM/LOCATION | TEMP |
|---------------------|-------------|---------------|------|
| <u>Milk cartons</u> | <u>40°F</u> | | |
| | | | |
| | | | |
| | | | |

OBSERVATIONS AND CORRECTIVE ACTIONS

1- No manager's Food Safety certificate. Provide within 2 months. No CA Food Handlers card for employee on duty. Provide within 2 weeks.

13- Several containers of uncovered food on floor. Cover to prevent contamination and/or infestation.

14- Reported utensils are cleaned with soap and sanitized with 409. Provide approved sanitizer TODAY, such as bleach or quaternary ammonium.

23- Several rodent droppings and dead cockroaches observed in facility. Clean and continue working with Pest Control Operator to abate.

Half eaten pieces of fruit and vegetables (coed, dried) stored in various places through

Owner/Operator: S.B Title: _____ REHS: _____



SUTTER COUNTY ENVIRONMENTAL HEALTH DIVISION
 DEVELOPMENT SERVICES DEPARTMENT
 1130 Civic Center Boulevard, Suite A
 Yuba City, CA 95993
 Ph# (530) 822-7400 Fax# (530) 822-7220

Date 11.29.16
 Page 3 of 4

RETAIL FOOD FACILITY INSPECTION REPORT

DBA: Fresh Donuts Permit Holder: _____
 Address: _____ City: _____ Zip: _____ Phone: _____

| ITEM/LOCATION | TEMP. | ITEM/LOCATION | TEMP. |
|---------------|-------|---------------|-------|
| | | | |
| | | | |
| | | | |
| | | | |

OBSERVATIONS AND CORRECTIVE ACTIONS

out facilities. Discard immediately to prevent attraction of vermin. Old, unwrapped donut stored in unused ice machine. Remove donuts - do not store where vermin will be attracted.

34 - Clean sprayer and drain boards at utensil sink to remove accumulated food debris.

35 - Clean all equipment to remove accumulated food debris and residues.

38 - No shatterproof light covers on lights in display/utensil cleaning/mop areas. Provide

41 - Leak at hand sink drain. Repair to maintain floor in dry manner. Bucket propping up utensil sink drain pipe. Remove bucket and properly secure.

Owner/Operator: SB Title: _____ REHS: _____



SUTTER COUNTY ENVIRONMENTAL HEALTH DIVISION
 DEVELOPMENT SERVICES DEPARTMENT
 1130 Civic Center Boulevard, Suite A
 Yuba City, CA 95993
 Ph# (530) 822-7400 Fax# (530) 822-7220

Date 11.29.16
 Page 4 of 4

RETAIL FOOD FACILITY INSPECTION REPORT

DBA: Fresh Donuts Permit Holder: _____
 Address: _____ City: _____ Zip: _____ Phone: _____

| ITEM/LOCATION | TEMP | ITEM/LOCATION | TEMP |
|---------------|------|---------------|------|
| | | | |
| | | | |
| | | | |

OBSERVATIONS AND CORRECTIVE ACTIONS

36 - Clean all containers storing "sprinkles", frosting and crumbs DAILY to remove heavy accumulation of food debris/residues.
 42 - Clean area outside back door to remove bird feces and discard broken trash can outside back door + provide new, covered trash can to prevent attraction of flies.
 43 - Hose being used to fill toilet tank. Reported facility needs new toilet. Replace toilet/repair to remove hose within 3 days. (Re-inspection to follow on this Friday).
 45 - Broken core base tile by utensil sink and broken floor tile (filled with water) in middle of floor. Repair with approved tile to be smooth and easily cleanable.
 Clean all walls to remove food residues.

Owner/Operator: S.C.B. Title: _____ REHS: _____



SUTTER COUNTY ENVIRONMENTAL HEALTH DIVISION
 DEVELOPMENT SERVICES DEPARTMENT
 1130 Civic Center Boulevard, Suite A
 Yuba City, CA 95993
 Ph# (530) 822-7400 Fax# (530) 822-7220

Date 12.14.16
 Page 1 of 2

RETAIL FOOD FACILITY INSPECTION REPORT

DBA: Fresh Donuts Permit Holder: _____

Address: Budge St City: YC Zip: _____ Phone: _____

Re-inspection

| ITEM/LOCATION | TEMP | ITEM/LOCATION | TEMP |
|---------------|------|---------------|------|
| | | | |
| | | | |
| | | | |

OBSERVATIONS AND CORRECTIVE ACTIONS

30- Pans storing frosting / crumbs etc. cleaner, but still have food residues on rim and outside of pans. Clean pans properly in utensil sink to maintain in a clean manner. Crumb container uncovered. Keep covered to prevent contamination and attraction of vermin.

35- Clean inside Cappichino machine DAILY to remove accumulated food debris. Accumulated food residues on spray nozzle handle at utensil sink. Keep handle clean. So you don't recontaminate / soil utensils just cleaned.

45- Tile popped over hole in covering properly repair sand core base tile and broken floor tile (with pooled water) in front of utensil sink

Owner/Operator: VJ Stear Title: _____

REHS: KMH



SUTTER COUNTY ENVIRONMENTAL HEALTH DIVISION
 DEVELOPMENT SERVICES DEPARTMENT
 1130 Civic Center Boulevard, Suite A
 Yuba City, CA 95993
 Ph# (530) 822-7400 Fax# (530) 822-7220

Date 12-14-16
 Page 2 of 2

RETAIL FOOD FACILITY INSPECTION REPORT

DBA: Fresh Smuts Permit Holder: _____
 Address: Bridge St City: YC Zip: _____ Phone: _____

| ITEM/LOCATION | TEMP | ITEM/LOCATION | TEMP |
|---------------|------|---------------|------|
| | | | |
| | | | |
| | | | |

OBSERVATIONS AND CORRECTIVE ACTIONS

25 - A few rodent droppings by stored baking mixes (bags) and in room storing water heater. NO paperwork from Pest Control Operator available. Clean all rodent droppings and abate. Obtain copies of service agreement with Pest Control Operator today. Re-inspection to follow in 14 days to see paperwork.

Facility a little cleaner. Continue cleaning and organizing so facility can monitor rodent activity and prevent attraction of rodents.

Facility should be ^{gully} clean and organized at next routine inspection.

Owner/Operator: VV Sieav Title: _____

REHS: [Signature]



SUTTER COUNTY ENVIRONMENTAL HEALTH DIVISION
 DEVELOPMENT SERVICES DEPARTMENT
 1130 Civic Center Boulevard, Suite A
 Yuba City, CA 95993
 Ph# (530) 822-7400 Fax# (530) 822-7220

Date 12.2.16
 Page 1 of 1

RETAIL FOOD FACILITY INSPECTION REPORT

DBA: Fresh Donuts Permit Holder: _____
 Address: 658 City: X Zip: 95991 Phone: _____
Re-inspection

| ITEM/LOCATION | TEMP. | ITEM/LOCATION | TEMP. |
|---------------|-------|---------------|-------|
| | | | |
| | | | |
| | | | |

OBSERVATIONS AND CORRECTIVE ACTIONS:

Observed toilet to have been properly repaired and operating normally.
 Violation corrected.

Continue to correct other violations from routine inspection dated 11.29.16.

Re-inspection to follow on cleaning two weeks from date of original inspection.

Owner/Operator: Vy Stea V Title: _____

REHS: Kimberly Hunt