

**BUTTE COUNTY PUBLIC HEALTH DEPARTMENT  
DIVISION OF ENVIRONMENTAL HEALTH  
FOOD PROGRAM OFFICIAL INSPECTION REPORT**

|   |                   |  |  |
|---|-------------------|--|--|
| <b>DBA/NAME</b> Chinese Gourmet Express               |                   | <b>DATE</b> 11-20-08                       |  |
| <b>ADDRESS</b> 1950 E. 20 <sup>th</sup> Street, Chico |                   | <b>RECHECK DATE</b> Call                   |  |
| <b>OWNER/OPERATOR</b>                                 |                   | <b>SITE #</b> 2013                         |  |
| <b>MAILING ADDRESS</b>                                |                   | <b>CORRECT MAJOR VIOLATIONS BY:</b>        |  |
| <b>INVENTORY TYPE</b> 16F-23                          | <b>SERVICE</b> 03 | <b>CORRECT MINOR VIOLATIONS BY:</b> 5+days |  |

See reverse side for the California Retail Food code sections and general requirements that correspond to each violation listed below

| In = In Compliance    N/O = Not Observed    N/A = Not Applicable    OUT = Out of Compliance    COS = Corrected On-Site    MAJ = Major Violation |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
|---|-----|-----|--|--|--|-----|-----|------------|---|-----|-----|---|-----|-----|-----|
| IN  | N/O | N/A | DEMONSTRATION OF KNOWLEDGE   |  |  | COS | MAJ | OUT        | IN  | N/O | N/A | PROTECTION FROM CONTAMINATION   | COS | MAJ | OUT |
| X   |     |     | 1. Demonstration of knowledge; food safety certification. FSC Exp. Date: |  |  |     |     |            | X   |     |     | 12. Proper procedures followed for returned and reservice of food                           |     |     |     |
| <b>EMPLOYEE HEALTH &amp; HYGIENIC PRACTICES</b>   |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| X   |     |     | 2. Communicable disease; reporting, restrictions & exclusions            |  |  |     |     |            | X   |     |     | 13. Food in good condition, safe and unadulterated  |     |     |     |
| X   |     |     | 3. No discharge from eyes, nose, and mouth                               |  |  |     |     |            | <b>APPROVED SOURCE &amp; SPECIAL PROCEDURES</b> |     |     |   |     |     |     |
| X   |     |     | 4. Proper eating, tasting, drinking or tobacco use                       |  |  |     |     |            | X   |     |     | 15. Food obtained from approved source  |     |     |     |
|   | X   |     | 5. Hands clean and properly washed; gloves used properly                 |  |  |     |     |            |   |     | X   | 16. Shell stock with completed tags, in good condition, properly stored/displayed           |     |     |     |
| X   |     |     | 6. Adequate handwashing facilities supplied & accessible                 |  |  |     |     |            |   |     | X   | 17. Compliance with Gulf Oyster Regulations   |     |     |     |
| <b>TIME &amp; TEMPERATURE RELATIONSHIPS</b>   |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| X   |     |     | 7. Proper hot and cold holding temperatures                              |  |  |     |     |            |   |     | X   | 18. Compliance with variance, specialized process, & HACCP Plan                             |     |     |     |
|   |     | X   | 8. Time as a public health control: Proper procedures & records          |  |  |     |     |            |   |     | X   | 19. Consumer advisory provided for raw or undercooked foods                                 |     |     |     |
| X   |     |     | 9. Proper cooling methods  |  |  |     |     |            |   |     | X   | 20. Licensed health care facilities/ public & private schools; prohibited foods not offered |     |     |     |
|   |     |     | 10. Proper cooking time & temperatures                                   |  |  |     |     | X          | <b>WATER &amp; WASTE WATER</b>                  |     |     |   |     |     |     |
|   | X   |     | 11. Proper reheating procedures for hot holding                          |  |  |     |     |            | X   | X   |     | 21. Hot and cold water available  |     |     |     |
|   |     |     |  |  |  |     |     |            |   |     |     | 22. Sewage and wastewater properly disposed   |     |     |     |
| <b>VERMIN</b>   |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
|   |     |     |  |  |  |     |     |            |   |     |     | 23. No rodents, insects, birds, or animals  |     |     | X   |
| <b>SUPERVISION /PERSONAL CLEANLINESS</b>  |     |     |  |  |  |     |     | <b>OUT</b> |   |     |     |   |     |     |     |
| 24. Person in charge present and performs duties  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 25. Personal cleanliness and hair restraints  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 26. Approved thawing methods used, frozen food maintained frozen.   |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 27. Food separated and protected  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 28. Fruits and vegetables washed as required.   |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 29. Toxic substances properly identified, stored, used  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 30. Food properly stored; food storage containers identified  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 31. Consumer self-service facilities properly constructed and maintained  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 32. Food properly labeled & honestly presented  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 33. Nonfood contact surfaces clean and in good repair.  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 34. Warewashing facilities: Adequate, maintained, properly used, test strips available  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 35. Equipment/ Utensils Approved; installed properly, clean; good repair, capacity  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 36. Equipment, utensils and linens: Properly stored and used  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 37. Vending machines  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 38. Adequate ventilation and lighting; designated areas, use  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 39. Thermometers provided and accurate  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 40. Wiping cloths: properly used and stored   |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 41. Plumbing: Plumbing in good repair, proper backflow devices  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 42. Garbage and refuse properly disposed; facilities maintained   |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 43. Toilet facilities: properly constructed, supplied, cleaned  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 44. Premises; personal/cleaning items; vermin-proofing  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 45. Floor, walls and ceilings: properly built, maintained in good repair, and clean   |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 46. No unapproved private homes/ living or sleeping quarters  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 47. Signs posted; last inspection report available  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 48. Plan review required for new or remodel construction  |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 49. Permits Available   |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 50. Impoundment of unsanitary equipment or food   |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 51. Permit Suspension   |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |
| 52. Other   |     |     |  |  |  |     |     |            |   |     |     |   |     |     |     |

**OBSERVATIONS AND CORRECTIVE ACTIONS:**

10, 39) No digital thermometers in cooking areas for cooks to use to check cooking temperatures.

21) Note: Make sure hot water is maintained at 120°F at utensil sink.

23) A few live cockroaches observed under front counters behind the coving. Continue treatment program.

30) Ice bucket not labeled "For ice only".    34) No test paper for sanitizer.

40) Soiled wiping rags observed on counters and tables.

41) Replace missing sprayer at utensil sink.

Reinspection fees will be charged for all subsequent reinspections unless an acceptable corrective time schedule has been submitted and approved by this Department. If, for any reasons beyond your control, you cannot correct the indicted violations by the next scheduled time, call this office prior to the inspection day.

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**R.E.H.S.**

**RECEIVED BY:** mailed

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