

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

| | |
|---|-------------------------------------|
| DBA/NAME Teriyaki House #2 | DATE 5-13-09 |
| ADDRESS 236 W. East Ave. #B, Chico | RECHECK DATE |
| OWNER/OPERATOR | SITE # 2111 |
| MAILING ADDRESS | CORRECT MAJOR VIOLATIONS BY: |
| INVENTORY TYPE 16F-23 | SERVICE 03 |
| | CORRECT MINOR VIOLATIONS BY: |

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 | |
| | | | 1. Demonstration of knowledge; food safety certification. FSC Exp. Date: 2010 | | | | | | | 12. Proper procedures followed for returned and reservice of food | | | | |
| EMPLOYEE HEALTH & HYGIENIC PRACTICES | | | | | | | | | | 13. Food in good condition, safe and unadulterated | | | | |
| | | | 2. Communicable disease; reporting, restrictions & exclusions | | | | X | | | 14. Food contact surfaces: clean and sanitized | | | | |
| | | | 3. No discharge from eyes, nose, and mouth | | | | | | | APPROVED SOURCE & SPECIAL PROCEDURES | | | | |
| X | | | 4. Proper eating, tasting, drinking or tobacco use | | | | | | | 15. Food obtained from approved source | | | | |
| | | | 5. Hands clean and properly washed; gloves used properly | | | | | | | 16. Shell stock with completed tags, in good condition, properly stored/displayed | | | | |
| | | | 6. Adequate handwashing facilities supplied & accessible | | | | | | | 17. Compliance with Gulf Oyster Regulations | | | | |
| TIME & TEMPERATURE RELATIONSHIPS | | | | | | | | | | 18. Compliance with variance, specialized process, & HACCP Plan | | | | |
| | | | 7. Proper hot and cold holding temperatures | | | | | | | 19. Consumer advisory provided for raw or undercooked foods | | | | |
| | | | 8. Time as a public health control: Proper procedures & records | | | | | | | 20. Licensed health care facilities/ public & private schools; prohibited foods not offered | | | | |
| | | | 9. Proper cooling methods | | | | | | | WATER & WASTE WATER | | | | |
| | | | 10. Proper cooking time & temperatures | | | | | | | 21. Hot and cold water available | | | | |
| | | | 11. Proper reheating procedures for hot holding | | | | | | | 22. Sewage and wastewater properly disposed | | | | |
| | | | | | | | | | | VERMIN | | | | |
| | | | | | | | | | | 23. No rodents, insects, birds, or animals | | | | |
| | | | | | | | OUT | | | | | | | OUT |
| SUPERVISION /PERSONAL CLEANLINESS | | | | | | | | | | | | | | |
| | | | 24. Person in charge present and performs duties | | | | | | | 38. Adequate ventilation and lighting; designated areas, use | | | | |
| | | | 25. Personal cleanliness and hair restraints | | | | | | | 39. Thermometers provided and accurate | | | | |
| GENERAL FOOD SAFETY REQUIREMENTS | | | | | | | | | | | | | | |
| | | | 26. Approved thawing methods used, frozen food maintained frozen. | | | | | | | 40. Wiping cloths: properly used and stored | | | | |
| | | | 27. Food separated and protected | | | | | | | PHYSICAL FACILITIES | | | | |
| | | | 28. Fruits and vegetables washed as required. | | | | | | | 41. Plumbing: Plumbing in good repair, proper backflow devices | | | | |
| | | | 29. Toxic substances properly identified, stored, used | | | | | | | 42. Garbage and refuse properly disposed; facilities maintained | | | | |
| FOOD STORAGE/ DISPLAY/ SERVICE | | | | | | | | | | | | | | |
| | | | 30. Food properly stored; food storage containers identified | | | | | | | 43. Toilet facilities: properly constructed, supplied, cleaned | | | | |
| | | | 31. Consumer self-service facilities properly constructed and maintained | | | | | | | 44. Premises; personal/cleaning items; vermin-proofing | | | | |
| | | | 32. Food properly labeled & honestly presented | | | | | | | PERMANENT FOOD FACILITIES | | | | |
| EQUIPMENT/ UTENSILS/ LINENS | | | | | | | | | | | | | | |
| | | | 33. Nonfood contact surfaces clean and in good repair. | | | | | | | 45. Floor, walls and ceilings: properly built, maintained in good repair, and clean | | | | |
| | | | 34. Warewashing facilities: Adequate, maintained, properly used, test strips available | | | | | | | 46. No unapproved private homes/ living or sleeping quarters | | | | |
| | | | 35. Equipment/ Utensils Approved; installed properly, clean; good repair, capacity | | | X | | | | SIGNS, MISC. REQUIREMENTS & ENFORCEMENT | | | | |
| | | | 36. Equipment, utensils and linens: Properly stored and used | | | X | | | | 47. Signs posted; last inspection report available | | | | |
| | | | 37. Vending machines | | | | | | | 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:

All utensils in rack atop drainboard and in food pan on utensil storage rack clean and Ok at time of reinspection. Necessary violations from report 5-8-09 have been corrected and no further reinspections to follow at his time.

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.

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Page 1 of 1