

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

|  |                   |                                     |
|--|-------------------|-------------------------------------|
| <b>DBA/NAME</b> North Valley Athletic Club                           |                   | <b>DATE</b> 6-28-07                 |
| <b>ADDRESS</b> 480 Rio Lindo Ave., Chico                             |                   | <b>RECHECK DATE</b>                 |
| <b>OWNER/OPERATOR</b> Scott Schofield                                |                   | <b>SITE #</b> 2238                  |
| <b>MAILING ADDRESS</b>   |                   | <b>CORRECT MAJOR VIOLATIONS BY:</b> |
| <b>INVENTORY TYPE</b> 16F-23   | <b>SERVICE</b> 01 | <b>CORRECT MINOR VIOLATIONS BY:</b> |
| <b>APPLICABLE LAW:</b> California Uniform Retail Food Facilities Law |                   | <b>PERMIT LICENSE</b>               |

The number and/or items cited below represent health and safety violations which must be corrected. The numbers referenced, correspond to violations of the California Uniform Retail Food Facilities Law listed on the reverse side. For complete text of the laws, refer to Division 104, Part 7, Chapter 4 of the California Health and Safety Code.

| #  | Violations           | Major | Minor |  |
|----|----------------------|-------|-------|--|
| 1  | Hot/Cold Holding     |       |       | <b>18-</b> Clean inside of microwave to remove some food residues. –Clean bottom of keg refrigerator and remove surface rust.<br><b>18, 31-</b> Clean compressor and floor/walls in hard-to-reach areas to remove dusty residues.<br><b>29-</b> Clean shelves storing bottled water/beverage syrup boxes and inside of cabinets to remove dust. Replace damaged (broken corners, holes) cabinet bottoms. Reseal/paint worn cabinets and shelves to facilitate cleaning.<br><b>38-</b> No current food safety certificate. At least one person regularly employed at this facility shall be signed up to pass an approved food safety exam within next 60 days. |
| 2  | Cooking/Reheating    |       |       |  |
| 3  | Cooling              |       |       |  |
| 4  | HACCP Plan           |       |       |  |
| 5  | Pure Food            |       |       |  |
| 6  | Frozen Food          |       |       |  |
| 7  | Refrigerator Storage |       |       |  |
| 8  | Food Storage         |       |       |  |
| 9  | Food Display         |       |       |  |
| 10 | Food Labeling        |       |       |  |
| 11 | Thermometer          |       |       | No major violations.   |
| 12 | Handwashing          |       |       |  |
| 13 | Gloves/Hand Contact  |       |       |  |
| 14 | Employee Habits      |       |       |  |
| 15 | Wash/sanitize        |       |       |  |
| 16 | Utensil Sink         |       |       |  |
| 17 | Dishwasher           |       |       |  |
| 18 | Equipment            |       | x     |  |
| 19 | Utensils             |       |       |  |
| 20 | Utensil Storage      |       |       |  |
| 21 | Vermin               |       |       |  |
| 22 | Chemical Hazards     |       |       |  |
| 23 | Spoils Storage       |       |       |  |
| 24 | Wiping Rags          |       |       |  |
| 25 | Water                |       |       |  |
| 26 | Plumbing             |       |       |  |
| 27 | Hand Sink            |       |       |  |
| 28 | Restrooms            |       |       |  |
| 29 | Shelving/Cabinets    |       | x     |  |
| 30 | Enclosure            |       |       |  |
| 31 | Walls/Floors/Ceiling |       | x     |  |
| 32 | Ventilation          |       |       |  |
| 33 | Janitorial Sink      |       |       |  |
| 34 | Lighting             |       |       |  |
| 35 | Refuse/Garbage       |       |       |  |
| 36 | Permit               |       |       |  |
| 37 | Plan Check           |       |       |  |
| 38 | Food Safety Cert     |       | x     |  |
| 39 | Signs                |       |       |  |
| 40 | Other                |       |       |  |

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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| <input checked="" type="checkbox"/><br>411 Main St.<br>P. O. Box 5364<br>Chico, CA 95927<br>(530) 891-2727<br>FAX (530) 895-6512 | <input type="checkbox"/><br>7 County Center Drive<br>Oroville, CA 95965<br>(530) 538-7281<br>FAX (530) 538-7785 |
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|-----------------------------|
| <b>R.E.H.S.</b>             |
| RECEIVED BY: signed 6-28-07 |
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