

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

| | |
|--|-------------------------------------|
| DBA/NAME Costco Wholesale #136 Warehouse Demo Services | DATE 8/16/07 |
| ADDRESS 2100 Dr. Martin Luther King Jr. Pkwy, Chico, CA | RECHECK DATE |
| OWNER/OPERATOR | SITE # 2720 |
| MAILING ADDRESS | CORRECT MAJOR VIOLATIONS BY: |
| INVENTORY TYPE 16F-14 | SERVICE 01 |
| | CORRECT MINOR VIOLATIONS BY: |

See reverse side for the 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 | | | | | | X | | | 12. Proper procedures followed for returned and reservice of food | | | | | |
| | | | EMPLOYEE HEALTH & HYGIENIC PRACTICES | | | | | | X | | | 13. Food in good condition, safe and unadulterated | | | | | |
| X | | | 2. Communicable disease; reporting, restrictions & exclusions | | | | | | X | | | 14. Food contact surfaces: clean and sanitized | | | | | |
| X | | | 3. No discharge from eyes, nose, and mouth | | | | | | Sanitizer Type: <input type="checkbox"/> Chlorine <input checked="" type="checkbox"/> Quaternary Ammonia <input type="checkbox"/> Hot Water <input type="checkbox"/> Other Sanitizer Concentration (ppm): 200 ppm | | | | | | | | |
| X | | | 4. Proper eating, tasting, drinking or tobacco use | | | | | | FOOD FROM APPROVED SOURCES | | | | | | | | |
| | | | PREVENTING CONTAMINATION BY HANDS | | | | | | 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 | | | | | |
| | | | TIME AND TEMPERATURE RELATIONSHIPS | | | | | | CONFORMANCE WITH APPROVED PROCEDURES | | | | | | | | |
| X | | | 7. Proper hot and cold holding temperatures | | | | | | | | X | 18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan | | | | | |
| | | X | 8. Time as a public health control: Proper procedures & records | | | | | | CONSUMER ADVISORY | | | | | | | | |
| | | X | 9. Proper cooling methods | | | | | | | | X | 19. Consumer advisory provided for raw or undercooked foods | | | | | |
| X | | | 10. Proper cooking time & temperatures | | | | | | HIGHLY SUSCEPTIBLE POPULATIONS | | | | | | | | |
| | | X | 11. Proper reheating procedures for hot holding | | | | | | | | X | 20. Licensed health care facilities/ public & private schools; prohibited foods not offered | | | | | |
| | | | | | | | | | WATER/HOT WATER | | | | | | | | |
| X | | | | | | | | | X | | | 21. Hot and cold water available Temp >120°F | | | | | |
| | | | | | | | | | LIQUID WASTE DISPOSAL | | | | | | | | |
| X | | | | | | | | | X | | | 22. Sewage and wastewater properly disposed | | | | | |
| | | | | | | | | | VERMIN | | | | | | | | |
| X | | | | | | | | | X | | | 23. No rodents, insects, birds, or animals | | | | | |
| | | | | | | | | | SUPERVISION | | | | | | | | |
| | | | | | | | | | OUT | | | | | | | | |
| | | | | | | | | | 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 maintained frozen. | | | | | | | | |
| | | | | | | | | | 27. Food separated and protected | | | | | | | | |
| | | | | | | | | | 28. Fruits and vegetables washed as required. | | | | | | | | |
| | | | | | | | | | 29. Toxic substances properly identified, stored, used | | | | | | | | |
| | | | | | | | | | FOOD STORAGE/ DISPLAY/ SERVICE | | | | | | | | |
| | | | | | | | | | 30. Food properly stored; food storage containers identified | | | | | | | | |
| | | | | | | | | | 31. Consumer self-service facilities properly constructed and maintained | | | | | | | | |
| | | | | | | | | | 32. Food properly labeled & honestly presented | | | | | | | | |
| | | | | | | | | | EQUIPMENT/ UTENSILS/ LINENS | | | | | | | | |
| | | | | | | | | | 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 | | | | | | | | |
| | | | | | | | | | PHYSICAL FACILITIES | | | | | | | | |
| | | | | | | | | | 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 | | | | | | | | |
| | | | | | | | | | PERMANENT FOOD FACILITIES | | | | | | | | |
| | | | | | | | | | 45. Floor, walls and ceilings: properly built, maintained in good repair, and clean | | | | | | | | |
| | | | | | | | | | 46. No unapproved private homes/ living or sleeping quarters | | | | | | | | |
| | | | | | | | | | SIGNS, MISC. REQUIREMENTS & ENFORCEMENT | | | | | | | | |
| | | | | | | | | | 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 | | | | | | | | |
| | | | | | | | | | NON-PERMANENT FOOD FACILITIES | | | | | | | | |
| | | | | | | | | | 53. Mobile food facilities | | | | | | | | |
| | | | | | | | | | 54. Temporary food facilities | | | | | | | | |

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.

202 Mira Loma Drive
Oroville, CA 95965
(530) 538-7281 or (530) 891-2727
www.buttecounty.net/publichealth/

R.E.H.S.

RECEIVED BY:

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| DBA/NAME Costco Warehouse Demo Services | DATE 8/16/07 |
| Food Safety Cert Name: Sheri van der Voort | Exp. Date: 8/15/12 |
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OBSERVATIONS AND CORRECTIVE ACTIONS

No violations observed.