

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

|                                     |                   |                                             |  |
|-------------------------------------|-------------------|---------------------------------------------|--|
| <b>DBA/NAME</b> Kathy's Deli        |                   | <b>DATE</b> 10-5-07                         |  |
| <b>ADDRESS</b> 671 Walnut St, Chico |                   | <b>RECHECK DATE</b>                         |  |
| <b>OWNER/OPERATOR</b>               |                   | <b>SITE #</b> 2766                          |  |
| <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> 21 days |  |

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                                                                     |     |     |
|----------------------------------------------------------------------------------------|-----|-----|-----------------------------------------------------------------|--|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---|---------------------------------------------------------------------------------------------|-----|-----|
| IN                                                                                     | N/O | N/A | COS = Corrected On-Site                                         |  |  | MAJ = Major Violation                                                                                                                                                                                        |  |   | COS                                                                                         | MAJ | OUT |
| x                                                                                      |     |     | 1. Demonstration of knowledge; food safety certification        |  |  | x                                                                                                                                                                                                            |  |   | 12. Proper procedures followed for returned and reservice of food                           |     |     |
| <b>EMPLOYEE HEALTH &amp; HYGIENIC PRACTICES</b>                                        |     |     |                                                                 |  |  | x                                                                                                                                                                                                            |  |   | 13. Food in good condition, safe and unadulterated                                          |     |     |
| x                                                                                      |     |     | 2. Communicable disease; reporting, restrictions & exclusions   |  |  |                                                                                                                                                                                                              |  |   | 14. Food contact surfaces: clean and sanitized                                              |     |     |
| x                                                                                      |     |     | 3. No discharge from eyes, nose, and mouth                      |  |  |                                                                                                                                                                                                              |  |   |                                                                                             |     |     |
| x                                                                                      |     |     | 4. Proper eating, tasting, drinking or tobacco use              |  |  |                                                                                                                                                                                                              |  |   |                                                                                             |     |     |
| <b>PREVENTING CONTAMINATION BY HANDS</b>                                               |     |     |                                                                 |  |  | Sanitizer Type: <input checked="" type="checkbox"/> Chlorine <input type="checkbox"/> Quaternary Ammonia <input type="checkbox"/> Hot Water <input type="checkbox"/> Other<br>Sanitizer Concentration (ppm): |  |   |                                                                                             |     |     |
| x                                                                                      |     |     | 5. Hands clean and properly washed; gloves used properly        |  |  | <b>FOOD FROM APPROVED SOURCES</b>                                                                                                                                                                            |  |   |                                                                                             |     |     |
| x                                                                                      |     |     | 6. Adequate handwashing facilities supplied & accessible        |  |  | x                                                                                                                                                                                                            |  |   | 15. Food obtained from approved source                                                      |     |     |
| <b>TIME AND TEMPERATURE RELATIONSHIPS</b>                                              |     |     |                                                                 |  |  |                                                                                                                                                                                                              |  | x | 16. Shell stock with completed tags, in good condition, properly stored/displayed           |     |     |
| x                                                                                      |     |     | 7. Proper hot and cold holding temperatures                     |  |  |                                                                                                                                                                                                              |  | x | 17. Compliance with Gulf Oyster Regulations                                                 |     |     |
|                                                                                        |     | x   | 8. Time as a public health control: Proper procedures & records |  |  |                                                                                                                                                                                                              |  | x | 18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan   |     |     |
| x                                                                                      |     |     | 9. Proper cooling methods                                       |  |  | <b>CONFORMANCE WITH APPROVED PROCEDURES</b>                                                                                                                                                                  |  |   |                                                                                             |     |     |
| x                                                                                      |     |     | 10. Proper cooking time & temperatures                          |  |  |                                                                                                                                                                                                              |  | x | 19. Consumer advisory provided for raw or undercooked foods                                 |     |     |
|                                                                                        |     | x   | 11. Proper reheating procedures for hot holding                 |  |  | <b>CONSUMER ADVISORY</b>                                                                                                                                                                                     |  |   |                                                                                             |     |     |
|                                                                                        |     |     |                                                                 |  |  |                                                                                                                                                                                                              |  | x | 20. Licensed health care facilities/ public & private schools; prohibited foods not offered |     |     |
| <b>SUPERVISION</b>                                                                     |     |     |                                                                 |  |  | <b>HIGHLY SUSCEPTIBLE POPULATIONS</b>                                                                                                                                                                        |  |   |                                                                                             |     |     |
| 24. Person in charge present and performs duties                                       |     |     |                                                                 |  |  | <b>WATER/HOT WATER</b>                                                                                                                                                                                       |  |   |                                                                                             |     |     |
| <b>PERSONAL CLEANLINESS</b>                                                            |     |     |                                                                 |  |  | x                                                                                                                                                                                                            |  |   | 21. Hot and cold water available                                                            |     |     |
| 25. Personal cleanliness and hair restraints                                           |     |     |                                                                 |  |  | <b>LIQUID WASTE DISPOSAL</b>                                                                                                                                                                                 |  |   |                                                                                             |     |     |
| <b>GENERAL FOOD SAFETY REQUIREMENTS</b>                                                |     |     |                                                                 |  |  | x                                                                                                                                                                                                            |  |   | 22. Sewage and wastewater properly disposed                                                 |     |     |
| 26. Approved thawing methods used, frozen food maintained frozen.                      |     |     |                                                                 |  |  | <b>VERMIN</b>                                                                                                                                                                                                |  |   |                                                                                             |     |     |
| 27. Food separated and protected                                                       |     |     |                                                                 |  |  | x                                                                                                                                                                                                            |  |   | 23. No rodents, insects, birds, or animals                                                  |     |     |
| 28. Fruits and vegetables washed as required.                                          |     |     |                                                                 |  |  | <b>PERMANENT FOOD FACILITIES</b>                                                                                                                                                                             |  |   |                                                                                             |     |     |
| 29. Toxic substances properly identified, stored, used                                 |     |     | x                                                               |  |  | 39. Thermometers provided and accurate                                                                                                                                                                       |  |   | OUT                                                                                         |     |     |
| <b>FOOD STORAGE/ DISPLAY/ SERVICE</b>                                                  |     |     |                                                                 |  |  | 40. Wiping cloths: properly used and stored                                                                                                                                                                  |  |   |                                                                                             |     |     |
| 30. Food properly stored; food storage containers identified                           |     |     | x                                                               |  |  | <b>PHYSICAL FACILITIES</b>                                                                                                                                                                                   |  |   |                                                                                             |     |     |
| 31. Consumer self-service facilities properly constructed and maintained               |     |     |                                                                 |  |  | 41. Plumbing: Plumbing in good repair, proper backflow devices                                                                                                                                               |  |   | x                                                                                           |     |     |
| 32. Food properly labeled & honestly presented                                         |     |     |                                                                 |  |  | 42. Garbage and refuse properly disposed; facilities maintained                                                                                                                                              |  |   |                                                                                             |     |     |
| <b>EQUIPMENT/ UTENSILS/ LINENS</b>                                                     |     |     |                                                                 |  |  | 43. Toilet facilities: properly constructed, supplied, cleaned                                                                                                                                               |  |   | x                                                                                           |     |     |
| 33. Nonfood contact surfaces clean and in good repair.                                 |     |     | x                                                               |  |  | 44. Premises; personal/cleaning items; vermin-proofing                                                                                                                                                       |  |   |                                                                                             |     |     |
| 34. Warewashing facilities: Adequate, maintained, properly used, test strips available |     |     | x                                                               |  |  | <b>PERMANENT FOOD FACILITIES</b>                                                                                                                                                                             |  |   |                                                                                             |     |     |
| 35. Equipment/ Utensils Approved; installed properly, clean; good repair, capacity     |     |     | x                                                               |  |  | 45. Floor, walls and ceilings: properly built, maintained in good repair, and clean                                                                                                                          |  |   | x                                                                                           |     |     |
| 36. Equipment, utensils and linens: Properly stored and used                           |     |     |                                                                 |  |  | 46. No unapproved private homes/ living or sleeping quarters                                                                                                                                                 |  |   |                                                                                             |     |     |
| 37. Vending machines                                                                   |     |     |                                                                 |  |  | <b>SIGNS, MISC. REQUIREMENTS &amp; ENFORCEMENT</b>                                                                                                                                                           |  |   |                                                                                             |     |     |
| 38. Adequate ventilation and lighting; designated areas, use                           |     |     |                                                                 |  |  | 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                                                                                                                                                                                                    |  |   | x                                                                                           |     |     |
|                                                                                        |     |     |                                                                 |  |  | <b>NON-PERMANENT FOOD FACILITIES</b>                                                                                                                                                                         |  |   |                                                                                             |     |     |
|                                                                                        |     |     |                                                                 |  |  | 53. Mobile food facilities                                                                                                                                                                                   |  |   |                                                                                             |     |     |
|                                                                                        |     |     |                                                                 |  |  | 54. Temporary food facilities                                                                                                                                                                                |  |   |                                                                                             |     |     |

Reinspection fees will be charged for all subsequent reinspection 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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www.buttecounty.net/publichealth/

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

**RECEIVED BY:**

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