

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

<b>DBA/NAME</b> Chico Masonic Family Center		<b>DATE</b> 12-12-07
<b>ADDRESS</b> 1110 W. East Ave., Chico		<b>RECHECK DATE</b>
<b>OWNER/OPERATOR</b> Chico LeLand Stanford Lodge #111		<b>SITE #</b> 2940
<b>MAILING ADDRESS</b>		<b>CORRECT MAJOR VIOLATIONS BY:</b>
<b>INVENTORY TYPE</b> 16F-25	<b>SERVICE</b> 01	<b>CORRECT MINOR VIOLATIONS BY:</b>

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				
			Food Safety Certificate Exp Date					X		13. Food in good condition, safe and unadulterated				
<b>EMPLOYEE HEALTH &amp; HYGIENIC PRACTICES</b>							X			14. Food contact surfaces: clean and sanitized				
X			2. Communicable disease; reporting, restrictions & exclusions				<b>FOOD FROM APPROVED SOURCES</b>							
X			3. No discharge from eyes, nose, and mouth					X		15. Food obtained from approved source				
X			4. Proper eating, tasting, drinking or tobacco use						X	16. Shell stock with completed tags, in good condition, properly stored/displayed				
X			5. Hands clean and properly washed; gloves used properly						X	17. Compliance with Gulf Oyster Regulations				
			6. Adequate handwashing facilities supplied & accessible			X	<b>SPECIAL PROCEDURES</b>							
<b>TIME AND TEMPERATURE RELATIONSHIPS</b>										18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan				
X			7. Proper hot and cold holding temperatures					X		19. Consumer advisory provided for raw or undercooked foods				
	X		8. Time as a public health control: Proper procedures & records						X	20. Licensed health care facilities/ public & private schools; prohibited foods not offered				
	X		9. Proper cooling methods				<b>WATER &amp; WASTE WATER</b>							
	X		10. Proper cooking time & temperatures				x			21. Hot and cold water available				
	X		11. Proper reheating procedures for hot holding				<b>LIQUID WASTE DISPOSAL</b>							
							x			22. Sewage and wastewater properly disposed				
							<b>VERMIN</b>							
							x			23. No rodents, insects, birds, or animals				
						OUT							OUT	
<b>SUPERVISION /PERSONAL CLEANLINESS</b>							<b>38. Adequate ventilation and lighting; designated areas, use</b>							X
24. Person in charge present and performs duties							<b>39. Thermometers provided and accurate</b>							
25. Personal cleanliness and hair restraints							<b>40. Wiping cloths: properly used and stored</b>							
<b>GENERAL FOOD SAFETY REQUIREMENTS</b>							<b>PHYSICAL FACILITIES</b>							
26. Approved thawing methods used, frozen food maintained frozen.							41. Plumbing: Plumbing in good repair, proper backflow devices							X
27. Food separated and protected							42. Garbage and refuse properly disposed; facilities maintained							
28. Fruits and vegetables washed as required.							43. Toilet facilities: properly constructed, supplied, cleaned							
29. Toxic substances properly identified, stored, used							44. Premises; personal/cleaning items; vermin-proofing							
<b>FOOD STORAGE/ DISPLAY/ SERVICE</b>							<b>PERMANENT FOOD FACILITIES</b>							
30. Food properly stored; food storage containers identified							45. Floor, walls and ceilings: properly built, maintained in good repair, and clean							X
31. Consumer self-service facilities properly constructed and maintained							46. No unapproved private homes/ living or sleeping quarters							
32. Food properly labeled & honestly presented							<b>SIGNS, MISC. REQUIREMENTS &amp; ENFORCEMENT</b>							
<b>EQUIPMENT/ UTENSILS/ LINENS</b>							47. Signs posted; last inspection report available							
33. Nonfood contact surfaces clean and in good repair.							48. Plan review required for new or remodel construction							
34. Warewashing facilities: Adequate, maintained, properly used, test strips available							49. Permits Available							
35. Equipment/ Utensils Approved; installed properly, clean; good repair, capacity							X	50. Impoundment of unsanitary equipment or food						
36. Equipment, utensils and linens: Properly stored and used							X	51. Permit Suspension						
37. Vending machines							52. Other							

**OBSERVATIONS AND CORRECTIVE ACTIONS:** 6- No Paper towels in dispenser at hand sink outside kitchen restroom.  
 35- Replace domestic microwave with approved commercial microwave within next 6 months. 36- Observed ice scoops stored directly atop machine.  
 38- No shatterproof light bulbs/covers for overhead lighting in hood and across from 1-door freezer.  
 41- Clean floor sinks under ice machine and at prep sink to remove some mold and trash.  
 45- Clean floor of misc. debris and silverware in locked utensil room.

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:**  
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