

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

DBA/NAME Chuck's Place		DATE 3/18/08
ADDRESS 14618 Skyway, Magalia, CA 95954		RECHECK DATE
OWNER/OPERATOR		SITE # 3527
MAILING ADDRESS		CORRECT MAJOR VIOLATIONS BY:
INVENTORY TYPE 16F-	SERVICE 03	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
			1. Demonstration of knowledge; food safety certification			√				12. Proper procedures followed for returned and reservice of food			
			Food Safety Certificate Exp Date							13. Food in good condition, safe and unadulterated			
EMPLOYEE HEALTH & HYGIENIC PRACTICES							√			14. Food contact surfaces: clean and sanitized			
			2. Communicable disease; reporting, restrictions & exclusions				FOOD FROM APPROVED SOURCES						
			3. No discharge from eyes, nose, and mouth							15. Food obtained from approved source			
			4. Proper eating, tasting, drinking or tobacco use							16. Shell stock with completed tags, in good condition, properly stored/displayed			
			5. Hands clean and properly washed; gloves used properly							17. Compliance with Gulf Oyster Regulations			
√			6. Adequate handwashing facilities supplied & accessible				SPECIAL PROCEDURES						
TIME AND TEMPERATURE RELATIONSHIPS										18. Compliance with variance, specialized process, reduced oxygen packaging, & 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				LIQUID WASTE DISPOSAL						
FULL RE-INSPECTION										22. Sewage and wastewater properly disposed			
SUPERVISION /PERSONAL CLEANLINESS										VERMIN			
						OUT				23. No rodents, insects, birds, or animals			
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										40. Wiping cloths: properly used and stored			
26. Approved thawing methods used, frozen food maintained frozen.							PHYSICAL FACILITIES						
27. Food separated and protected										41. Plumbing: Plumbing in good repair, proper backflow devices			
28. Fruits and vegetables washed as required.										42. Garbage and refuse properly disposed; facilities maintained			
29. Toxic substances properly identified, stored, used										43. Toilet facilities: properly constructed, supplied, cleaned			
FOOD STORAGE/ DISPLAY/ SERVICE										44. Premises; personal/cleaning items; vermin-proofing			
30. Food properly stored; food storage containers identified							PERMANENT FOOD FACILITIES						
31. Consumer self-service facilities properly constructed and maintained										45. Floor, walls and ceilings: properly built, maintained in good repair, and clean			√
32. Food properly labeled & honestly presented							SIGNS, MISC. REQUIREMENTS & ENFORCEMENT						
EQUIPMENT/ UTENSILS/ LINENS										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										50. Impoundment of unsanitary equipment or food			
36. Equipment, utensils and linens: Properly stored and used										51. Permit Suspension			
37. Vending machines										52. Other			

OBSERVATIONS AND CORRECTIVE ACTIONS: 1- Provide documentation within sixty days that at least one person currently working at this facility has passed an approved food safety examination. Fax or mail to this Department. Please include name of facility on certificate.

38- Replace missing light bulbs in fixture over utensil sink.

39- Seal/replace missing vinyl around floor ink (under utensil sink) to prevent further damage to flooring.

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
FAX (530) 538-5339
www.buttecounty.net/publichealth/

R.E.H.S.

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