

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

DBA/NAME <u>Rite Aid</u>		DATE <u>6-16-08</u>
ADDRESS <u>1583 Hwy 99, Gridley</u>		RECHECK DATE
OWNER/OPERATOR		SITE # <u>4109</u>
MAILING ADDRESS		CORRECT MAJOR VIOLATIONS BY:
INVENTORY TYPE <u>16F-13</u>	SERVICE <u>01</u>	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	
<input checked="" type="checkbox"/>			1. Demonstration of knowledge; food safety certification						<input checked="" type="checkbox"/>	12. Proper procedures followed for returned and reservice of food				
Food Safety Certificate Exp Date <u>5-24-10</u>							<input checked="" type="checkbox"/>			13. Food in good condition, safe and unadulterated				
EMPLOYEE HEALTH & HYGIENIC PRACTICES										14. Food contact surfaces: clean and sanitized			<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>			2. Communicable disease; reporting, restrictions & exclusions						FOOD FROM APPROVED SOURCES					
<input checked="" type="checkbox"/>			3. No discharge from eyes, nose, and mouth				<input checked="" type="checkbox"/>		15. Food obtained from approved source					
<input checked="" type="checkbox"/>			4. Proper eating, tasting, drinking or tobacco use						16. Shell stock with completed tags, in good condition, properly stored/displayed					
<input checked="" type="checkbox"/>			5. Hands clean and properly washed; gloves used properly						17. Compliance with Gulf Oyster Regulations					
<input checked="" type="checkbox"/>			6. Adequate handwashing facilities supplied & accessible						SPECIAL PROCEDURES					
TIME AND TEMPERATURE RELATIONSHIPS									<input checked="" type="checkbox"/>	18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan				
<input checked="" type="checkbox"/>			7. Proper hot and cold holding temperatures						<input checked="" type="checkbox"/>	19. Consumer advisory provided for raw or undercooked foods				
		<input checked="" type="checkbox"/>	8. Time as a public health control: Proper procedures & records						<input checked="" type="checkbox"/>	20. Licensed health care facilities/ public & private schools; prohibited foods not offered				
		<input checked="" type="checkbox"/>	9. Proper cooling methods						WATER & WASTE WATER					
		<input checked="" type="checkbox"/>	10. Proper cooking time & temperatures				<input checked="" type="checkbox"/>		21. Hot and cold water available					
		<input checked="" type="checkbox"/>	11. Proper reheating procedures for hot holding						LIQUID WASTE DISPOSAL					
							<input checked="" type="checkbox"/>		22. Sewage and wastewater properly disposed					
									VERMIN					
							<input checked="" type="checkbox"/>		23. No rodents, insects, birds, or animals					
SUPERVISION /PERSONAL CLEANLINESS							OUT							
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								46. No unapproved private homes/ living or sleeping quarters						
EQUIPMENT/ UTENSILS/ LINENS								SIGNS, MISC. REQUIREMENTS & ENFORCEMENT						
33. Nonfood contact surfaces clean and in good repair.								47. Signs posted; last inspection report available						
34. Warewashing facilities: Adequate, maintained, properly used, test strips available								48. Plan review required for new or remodel construction						
35. Equipment/ Utensils Approved; installed properly, clean; good repair, capacity								49. Permits Available						
36. Equipment, utensils and linens: Properly stored and used								50. Impoundment of unsanitary equipment or food						
37. Vending machines								51. Permit Suspension						
								52. Other						

OBSERVATIONS AND CORRECTIVE ACTIONS:

H- wash, rinse and then sanitize utensils using an approved sanitizer (ie: 1 ounce bleach in 4 gal water) rather than just washing and rinsing utensils. Air dry utensils on drainboard - remove paper towel liner on drainboard

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 indicated violations by the next scheduled time, call this office prior to the inspection day.

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