



Environmental Health Division
 270 County Hospital Rd. Ste 127
 Quincy, CA 95971
 Ph: (530) 283-6355 Fax: (530) 283-6241
 www.plumascounty.us

Plumas County Cottage Food Operation Official Inspection Report

Date: 1/6/14
 Page: 1 of 1

DBA: Traci's Sweet Surprises Owner: Traci Downey

Address: [Redacted] K Quincy Phone: 283-

| | | | | |
|---|--------------------------|-------------|---|---|
| <input type="checkbox"/> Class A | Registration #: _____ | PR | <input checked="" type="checkbox"/> Routine | <input type="checkbox"/> Complaint |
| <input checked="" type="checkbox"/> Class B | Permit #: <u>14-4258</u> | <u>4258</u> | <input type="checkbox"/> Reinspection | <input type="checkbox"/> Initial Inspection |

Violations pose a threat to public health and must be corrected. Uncorrected violations may warrant closure of the Cottage Food Operation (CFO). A reinspection may be conducted and fees assessed as authorized by Plumas County ordinance.

IN - In Compliance OUT - Out of Compliance N/A - Not Applicable N/O - Not Observed

| Demonstration of Knowledge | IN | OUT | N/A | N/O | Facility Requirements | IN | OUT | N/A | N/O |
|---|----|-----|-----|-----|---|----|-----|-----|-----|
| 1a. Self-certification checklist submitted | ✓ | | | | 7a. Adequate storage for food and related equipment | ✓ | | | |
| 1b. Food processor course complete | ✓ | | | | 7b. Food preparation occurs in private kitchen of CFO | ✓ | | | |
| Employee Health & Hygiene Practices | | | | | 7c. CFO located in private dwelling /operator residence | ✓ | | | |
| 2a. No ill employees or workers | ✓ | | | | Labeling | | | | |
| 2b. No smoking in CFO | ✓ | | | | 8a. "Made in a Home Kitchen" on package | ✓ | | | |
| 2c. Employees shall not contaminate food | ✓ | | | | 8b. Common name of product on package | ✓ | | | |
| Prevent Contamination by Hands | | | | | 8c. Name of CFO on package | ✓ | | | |
| 3a. Hand washing station stocked and available | ✓ | | | | 8d. Ingredients listed on package | ✓ | | | |
| 3b. Hands washed prior to food preparation | ✓ | | | | 8e. Registration or permit number on package | ✓ | | | |
| 3c. Proper glove use | ✓ | | | | Vermin | | | | |
| Approved food item | | | | | 9. No rodents, insects or animals within CFO | ✓ | | | |
| 4. Food prepared from approved food list only | ✓ | | | | Compliance and Enforcement | | | | |
| Water | | | | | 10a. CFO operating with valid permit or registration | ✓ | | | |
| 5. Potable water source | ✓ | | | | 10b. Approved direct sales to consumers | ✓ | | | |
| Protection from Contamination | | | | | 10c. Approved indirect sales in county of origin | ✓ | | | |
| 6a. Food free from contamination and adulteration | ✓ | | | | 10d. Approved number of employees | ✓ | | | |
| 6b. Kitchen equipment and utensils clean and in good repair | ✓ | | | | 10e. Meets gross sales requirements | ✓ | | | |
| 6c. Food contact surfaces are cleaned and sanitized | ✓ | | | | Other: | | | | |
| 6e. No infants, small children, or pets in kitchen during CFO hours | ✓ | | | | | | | | |

Received by (Print): Traci Downey Title: Owner
 Received by (Signature): [Signature]
 Specialist (Print): Deborah Anderson Specialist (Signature): [Signature]
 Re-inspection Date: Routine