



Date of Inspection: 12/18/15

Facility Name: Twain General Store Phone Number: \_\_\_\_\_ PR ID # 31  
 Facility Site Address: 130 Twain Store Rd City: Twain Zip: 95984  
 Permit #: 15-138547 Exp Date: 9/15/16 Permit Holder: Hardy + Joyce Lindahl  
 Type of Inspection: Routine

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 COS = Corrected on-site MAJ = Major violation OUT = Out of Compliance

| In   | N/O-N/A | COS | MAJ | OUT |
|--|---------|-----|-----|-----|
| <b>DEMONSTRATION OF KNOWLEDGE</b>                                    |         |     |     |     |
| ✓  |         |     |     |     |
| 1. Demonstration of knowledge: food safety certification             |         |     |     |     |
| Food Safety Cert Name: <u>Pamela Ayles</u> Exp. Date: <u>9/17/18</u> |         |     |     |     |
| <b>EMPLOYEE HEALTH &amp; HYGIENIC PRACTICES</b>                      |         |     |     |     |
| ✓  |         |     |     |     |
| 2. Communicable disease; reporting, restrictions & exclusions        |         |     |     |     |
| ✓  |         |     |     |     |
| 3. No discharge from eyes, nose, and mouth                           |         |     |     |     |
| ✓  |         |     |     |     |
| 4. Proper eating, tasting, drinking or tobacco use                   |         |     |     |     |
| <b>PREVENTING CONTAMINATION BY HANDS</b>                             |         |     |     |     |
| ✓  |         |     |     |     |
| 5. Hands clean and properly washed; gloves used properly             |         |     |     |     |
| ✓  |         |     |     |     |
| 6. Adequate handwashing facilities supplied & accessible             |         |     |     |     |
| <b>TIME AND TEMPERATURE RELATIONSHIPS</b>                            |         |     |     |     |
| ✓  |         |     |     |     |
| 7. Proper hot and cold holding temperatures                          |         |     |     |     |
| ✓  |         |     |     |     |
| 8. Time as a public health control; procedures & records             |         |     |     |     |
| ✓  |         |     |     |     |
| 9. Proper cooling methods  |         |     |     |     |
| ✓  |         |     |     |     |
| 10. Proper cooking time & temperatures                               |         |     |     |     |
| ✓  |         |     |     |     |
| 11. Proper reheating procedures for hot holding                      |         |     |     |     |
| <b>PROTECTION FROM CONTAMINATION</b>                                 |         |     |     |     |
| ✓  |         |     |     |     |
| 12. Returned and re-service of food                                  |         |     |     |     |
| ✓  |         |     |     |     |
| 13. Food in good condition, safe and unadulterated                   |         |     |     |     |
| ✓  |         |     |     |     |
| 14. Food contact surfaces: clean and sanitized                       |         |     |     |     |

| In  | N/O-N/A | COS | MAJ | OUT |
|---|---------|-----|-----|-----|
| <b>FOOD FROM APPROVED SOURCES</b>   |         |     |     |     |
| ✓   |         |     |     |     |
| 15. Food obtained from approved source  |         |     |     |     |
| ✓   |         |     |     |     |
| 16. Compliance with shell stock tags, condition, display                                    |         |     |     |     |
| ✓   |         |     |     |     |
| 17. Compliance with Gulf Oyster Regulations   |         |     |     |     |
| <b>CONFORMANCE WITH APPROVED PROCEDURES</b>   |         |     |     |     |
| ✓   |         |     |     |     |
| 18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan   |         |     |     |     |
| <b>CONSUMER ADVISORY</b>  |         |     |     |     |
| ✓   |         |     |     |     |
| 19. Consumer advisory provided for raw or undercooked foods                                 |         |     |     |     |
| <b>Highly Susceptible Populations</b>   |         |     |     |     |
| ✓   |         |     |     |     |
| 20. Licensed health care facilities/ public & private schools; prohibited foods not offered |         |     |     |     |
| <b>WATER/HOT WATER</b>  |         |     |     |     |
| ✓   |         |     |     |     |
| 21. Hot and cold water available Temp <u>112°F</u>  |         |     |     |     |
| <b>LIQUID WASTE DISPOSAL</b>  |         |     |     |     |
| ✓   |         |     |     |     |
| 22. Sewage and wastewater properly disposed   |         |     |     |     |
| <b>VERMIN</b>   |         |     |     |     |
| ✓   |         |     |     |     |
| 23. No rodents, insects, birds, or animals  |         |     |     |     |

| SUPERVISION   | OUT |
|---|-----|
| 24. Person in charge present and performs duties                          |     |
| <b>PERSONAL CLEANLINESS</b>   |     |
| 25. Personal cleanliness and hair restraints                              |     |
| <b>GENERAL FOOD SAFETY REQUIREMENTS</b>                                   |     |
| 26. Approved thawing methods used, frozen food                            |     |
| 27. Food separated and protected  |     |
| 28. Washing fruits and vegetables   |     |
| 29. Toxic substances properly identified, stored, used                    |     |
| <b>FOOD STORAGE/ DISPLAY/ SERVICE</b>                                     |     |
| 30. Food storage: food storage containers identified                      |     |
| 31. Consumer self-service   |     |
| 32. Food properly labeled & honestly presented                            |     |
| <b>EQUIPMENT/ UTENSILS/ LINENS</b>  |     |
| 33. Nonfood contact surfaces clean  |     |
| 34. Warewashing facilities: installed, maintained, used; test strips      | ✓   |
| 35. Equipment/ Utensils approved; installed; clean; good repair; capacity |     |
| 36. Equipment, utensils and linens: storage and use                       |     |
| 37. Vending machines  |     |
| 38. Adequate ventilation and lighting; designated areas, use              |     |

| OUT   |  |
|---|--|
| 39. Thermometers provided and accurate                          |  |
| 40. Wiping cloths: properly used and stored                     |  |
| <b>PHYSICAL FACILITIES</b>                                      |  |
| 41. Plumbing: proper backflow devices                           |  |
| 42. Garbage and refuse properly disposed; facilities maintained |  |
| 43. Toilet facilities: properly constructed, supplied, cleaned  |  |
| 44. Premises: personal/cleaning items: vermin-proofing          |  |
| <b>PERMANENT FOOD FACILITIES</b>                                |  |
| 45. Floor, walls and ceilings: built, maintained, and clean     |  |
| 46. No unapproved private homes/ living or sleeping quarters    |  |
| <b>SIGNS/ REQUIREMENTS</b>                                      |  |
| 47. Signs posted; last inspection report available              |  |
| <b>COMPLIANCE &amp; ENFORCEMENT</b>                             |  |
| 48. Plan Review   |  |
| 49. Permits Available   |  |
| 50. Impoundment   |  |
| 51. Permit Suspension   |  |

Received by (Print) Joyce M. Berry-Lindahl Title \_\_\_\_\_  
 Received by (Signature) Joyce M. Berry-Lindahl  
 Specialist (Print) Deborah Anderson Specialist (Signature) Deborah Anderson Re-inspection Date: Routine

Facility Name: Twain General Store

FA ID # 31

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**OBSERVATIONS AND CORRECTIVE ACTIONS**

③ Obtain test strips to measure sanitizer rinse. Manual sanitation is 100 ppm chlorine, then air dry.

Received by (Print)

Joyce M. Geerky-Lindahl

Title

Received by (Signature)

Joyce M. Geerky-Lindahl

Specialist (Print)

Deborah Anderson

Specialist (Signature)

Deborah Anderson

Re-inspection Date:

Routine