



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: 4/5/16
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DBA: ANGELA'S BAKER WAY BAKERY Owner: ANGELA SANDOLIN
 Address: 2336 EAST MAIN, QUINCY, CA 95971 Phone: (530) 591-2509

<input type="checkbox"/> Class A	Registration #: <u>15-136005</u>	PR	<input type="checkbox"/> Routine	<input type="checkbox"/> Complaint
<input checked="" type="checkbox"/> Class B	Permit #: _____	<u>287</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	X				7a. Adequate storage for food and related equipment	X			
1b. Food processor course complete <u>6/17/16</u>	X				7b. Food preparation occurs in private kitchen of CFO	X			
Employee Health & Hygiene Practices					7c. CFO located in private dwelling /operator residence	X			
2a. No ill employees or workers	X				Labeling				
2b. No smoking in CFO	X				8a. "Made in a Home Kitchen" on package	X			
2c. Employees shall not contaminate food	X				8b. Common name of product on package	X			
Prevent Contamination by Hands					8c. Name of CFO on package	X			
3a. Hand washing station stocked and available	X				8d. Ingredients listed on package	X			
3b. Hands washed prior to food preparation	X				8e. Registration or permit number on package	X			
3c. Proper glove use	X				Vermis				
Approved food item					9. No rodents, insects or animals within CFO	X			
4. Food prepared from approved food list only	X				Compliance and Enforcement				
Water					10a. CFO operating with valid permit or registration <u>PRE-OPEN</u>			X	
5. Potable water source <u>EQCSD</u>	X				10b. Approved direct sales to consumers	X			
Protection from Contamination					10c. Approved indirect sales in county of origin	X			
6a. Food free from contamination and adulteration	X				10d. Approved number of employees	X			
6b. Kitchen equipment and utensils clean and in good repair	X				10e. Meets gross sales requirements	X		X	
6c. Food contact surfaces are cleaned and sanitized	X				Other:				
6e. No infants, small children, or pets in kitchen during CFO hours	X								

PRE-OPENING INSPECTION OF NEW LOCATION OF BUSINESS

Received by (Print): ANGELA SANDOLIN Title: _____
 Received by (Signature): [Signature]
 Specialist (Print): PAT SANDERS Specialist (Signature): [Signature]
 Re-inspection Date: _____