



PLUMAS COUNTY  
ENVIRONMENTAL HEALTH DIVISION  
**FOOD SAFETY EVALUATION REPORT**  
270 County Hospital Rd., Ste 127 Quincy, CA 95971  
Phone: (530) 283-6355 FAX (530) 283-6241

Date of Inspection: 4/12/16

Facility Name: MAIN STREET SPORTS BAR Phone Number: 283-9788 PR ID #: 205  
 Facility Site Address: 395 W. MAIN City: QUINCY Zip: 95971  
 Permit #: 15-135989 Exp Date: 6/10/16 Permit Holder: KAREN POWELL  
 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>				
X				
1. Demonstration of knowledge; food safety certification				
Food Safety Cert Name: <u>Karen Powell</u> Exp. Date: <u>9/17/18</u>				
<b>EMPLOYEE HEALTH &amp; HYGIENIC PRACTICES</b>				
X				
2. Communicable disease; reporting, restrictions & exclusions				
X				
3. No discharge from eyes, nose, and mouth				
X				
4. Proper eating, tasting, drinking or tobacco use				
<b>PREVENTING CONTAMINATION BY HANDS</b>				
X				
5. Hands clean and properly washed; gloves used properly				
X				
6. Adequate handwashing facilities supplied & accessible				
<b>TIME AND TEMPERATURE RELATIONSHIPS</b>				
X				
7. Proper hot and cold holding temperatures				
	X			
8. Time as a public health control; procedures & records				
	X			
9. Proper cooling methods				
	X			
10. Proper cooking time & temperatures				
	X			
11. Proper reheating procedures for hot holding				
<b>PROTECTION FROM CONTAMINATION</b>				
X				
12. Returned and re-service of food				
X				
13. Food in good condition, safe and unadulterated				
X				
14. Food contact surfaces: clean and sanitized				

In	N/O-N/A	COS	MAJ	OUT
<b>FOOD FROM APPROVED SOURCES</b>				
X				
15. Food obtained from approved source				
X				
16. Compliance with shell stock tags, condition, display				
X				
17. Compliance with Gulf Oyster Regulations				
<b>CONFORMANCE WITH APPROVED PROCEDURES</b>				
X				
18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan				
<b>CONSUMER ADVISORY</b>				
	X			
19. Consumer advisory provided for raw or undercooked foods				
<b>Highly Susceptible Populations</b>				
	X			
20. Licensed health care facilities/ public & private schools; prohibited foods not offered				
<b>WATER/HOT WATER</b>				
X				
21. Hot and cold water available Temp <u>120°F+</u>				
<b>LIQUID WASTE DISPOSAL</b>				
X				
22. Sewage and wastewater properly disposed				
<b>VERMIN</b>				
X				
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) Stephen Lyons Title \_\_\_\_\_  
 Received by (Signature) \_\_\_\_\_  
 Specialist (Print) PAT SANDOZ Specialist (Signature) [Signature] Re-inspection Date: \_\_\_\_\_