



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

pg 1 of 2

Date of Inspection: 30 May 19

|   |                              |  |
|---|------------------------------|--|
| Facility Name: <u>MAKOMA GOLF RESORT</u>      | Phone Number <u>832-5067</u> | PR ID # <u>494</u>                         |
| Facility Site Address: <u>3418 BEAR RIVER</u> | City: <u>CRC</u>             | Zip <u>90168</u>                           |
| Permit #: <u>19-036</u>                       | Exp Date: <u>6/1/20</u>      | Permit Holder: <u>MAKOMA ASSOCIATES CP</u> |
| Type of Inspection: <u>ROUTINE</u>            |                              |  |

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>MAKOMA</u> Exp. Date: <u>4/15/20</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  |         |     |     |     |
| <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>112.7</u>  |         |     |     |     |
| <b>LIQUID WASTE DISPOSAL</b>  |         |     |     |     |
| X 22. Sewage and wastewater properly disposed   |         |     |     |     |
| <b>VERMIN</b>   |         |     |     |     |
| X 23. No rodents, insects, birds, or animals  |         |     |     |     |

| <b>SUPERVISION</b>  |  | 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  |  | X   |
| 28. Washing fruits and vegetables   |  | X   |
| 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 |  | X   |
| 36. Equipment, utensils and linens: storage and use                       |  |     |
| 37. Vending machines  |  |     |
| 38. Adequate ventilation and lighting; designated areas, use              |  | X   |
| <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                    |  | X   |
| <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)

Joe Wipke

Title

Bar Major

Received by (Signature)

Joe Wipke

Specialist (Print)

Robb Robbette

Specialist (Signature)

Re-inspection Date:

6/1/03

## OBSERVATIONS AND CORRECTIVE ACTIONS

#7) REPAIR OR ADJUST THE FOOD PREPARATION REACH-IN REFRIGERATORS TO HOLD FOOD AT 41°F OR BELOW (FOUND AT 45°F)

#9) COOL HOT FOODS IN SHALLOW PANS ON THE ICE BATH BEFORE PLACING IN REFRIGERATOR - CORRECTED AT TIME OF INSPECTION.

#21) INCREASE KITCHEN HOT WATER TEMPERATURE TO 120°F (FOUND AT 112°F).

#27) PROVIDE SMOOTH AND EASILY CLEANABLE CONTAINERS FOR OPENED BAGS OF DRY GOODS - SEE BAGGED FOODS IN THE DOWNSHINE FOOD STORAGE ROOM - COVER FOODS BY THE WALK-IN.

#35) PROVIDE UTENSILS AT THE COOKLINE THAT ARE FREE OF TAPE AND IN GOOD REPAIR.

#38) REPAIR THE DAMAGED OVER HEAD LIGHTING IN THE WALK-IN REFRIGERATOR

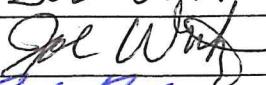
#44) REPLACE ALL MISSING CEILING TIERS IN ALL FOOD PREPARATION AND FOOD STORAGE AREAS.

Received by (Print)

JOE WINKZ

Title Bar Mgr.

Received by (Signature)



Specialist (Print)



Specialist (Signature)

Re-inspection Date: