



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

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Date of Inspection: 23 July 20

Facility Name: <i>GRIZZLY GRILL</i>	Phone Number: <i>836-1306</i>	PR ID #: <i>160</i>
Facility Site Address: <i>250 BONITA ST</i>	City: <i>BONITA SPRINGS</i>	Zip: <i>96103</i>
Permit #: <i>20-128</i>	Exp Date: <i>6/14/21</i>	Permit Holder: <i>CHRIS SIMONE</i>
		Type of Inspection: SPECIAL

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
DEMONSTRATION OF KNOWLEDGE				
1. Demonstration of knowledge; food safety certification <input checked="" type="checkbox"/>				
Food Safety Cert Name: <i>-Pending-</i> Exp. Date				
X 2. All food handlers have valid Food Handler Cards				
EMPLOYEE HEALTH & HYGIENIC PRACTICES				
X <input checked="" type="checkbox"/> 3. Communicable disease; reporting, restrictions & exclusions				
X 4. No discharge from eyes, nose, and mouth				
X 5. Proper eating, tasting, drinking or tobacco use <input checked="" type="checkbox"/>				
PREVENTING CONTAMINATION BY HANDS				
X 6. Hands clean and properly washed; gloves used properly				
X <input checked="" type="checkbox"/> 7. Adequate handwashing facilities supplied & accessible				
TIME AND TEMPERATURE RELATIONSHIPS				
X <input checked="" type="checkbox"/> 8. Proper hot and cold holding temperatures				
X <input checked="" type="checkbox"/> 9. Time as a public health control; procedures & records				
X 10. Proper cooling methods				
X 11. Proper cooking time & temperatures				
X 12. Proper reheating procedures for hot holding				
PROTECTION FROM CONTAMINATION				
X 13. Returned and re-service of food <input checked="" type="checkbox"/>				
X <input checked="" type="checkbox"/> 14. Food in good condition, safe and unadulterated				
X 15. Food contact surfaces: clean and sanitized				

In	N/O-N/A	COS	MAJ	OUT
FOOD FROM APPROVED SOURCES				
X <input checked="" type="checkbox"/> 16. Food obtained from approved source				
CORONAVIRUS GUIDANCE IMPLEMENTATION				
X <input checked="" type="checkbox"/> 17. Takeout, Curbside Pickup, or Delivery Only				
X <input checked="" type="checkbox"/> 18. Social Distancing Implemented				
X <input checked="" type="checkbox"/> 19. Face Covering Used				
Highly Susceptible Populations				
X 20. Licensed health care facilities/ public & private schools; prohibited foods not offered				
WATER/HOT WATER				
X <input checked="" type="checkbox"/> 21. Hot and cold water available				
LIQUID WASTE DISPOSAL				
X <input checked="" type="checkbox"/> 22. Sewage and wastewater properly disposed				
VERMIN				
X <input checked="" type="checkbox"/> 23. No rodents, insects, birds, or animals				

FOOD SAFETY AND CORONAVIRUS (COVID-19) SPECIAL INSPECTION OBSERVATIONS

Received by (Print)

Title

Email:

Specialist (Print)

Specialist (Signature)

Re-inspection Date: