



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: 24 APR 20

Facility Name: <u>SUBWAY PORTOLA</u>	Phone Number: <u>832-0222</u>	PR ID #: <u>529</u>
Facility Site Address: <u>24 W SIERRA</u>	City: <u>PORTOLA</u>	Zip: <u>96122</u>
Permit #: <u>19-4496</u> <u>20-449</u>	Exp Date: <u>3/1/21</u>	Permit Holder: <u>ANDREA HAZEGHARAN</u>
		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					
<input checked="" type="checkbox"/>		1. Demonstration of knowledge; food safety certification			
		Food Safety Cert Name: <u>MAJ</u>	Exp. Date		
		2. All food handlers have valid Food Handler Cards			
EMPLOYEE HEALTH & HYGIENIC PRACTICES					
<input checked="" type="checkbox"/>		3. Communicable disease; reporting, restrictions & exclusions			
<input checked="" type="checkbox"/>		4. No discharge from eyes, nose, and mouth			
<input checked="" type="checkbox"/>		5. Proper eating, tasting, drinking or tobacco use			
PREVENTING CONTAMINATION BY HANDS					
<input checked="" type="checkbox"/>		6. Hands clean and properly washed; gloves used properly			
<input checked="" type="checkbox"/>		7. Adequate handwashing facilities supplied & accessible			
TIME AND TEMPERATURE RELATIONSHIPS					
<input checked="" type="checkbox"/>		8. Proper hot and cold holding temperatures			
<input checked="" type="checkbox"/>		9. Time as a public health control; procedures & records			
<input checked="" type="checkbox"/>		10. Proper cooling methods			
<input checked="" type="checkbox"/>		11. Proper cooking time & temperatures			
<input checked="" type="checkbox"/>		12. Proper reheating procedures for hot holding			
PROTECTION FROM CONTAMINATION					
<input checked="" type="checkbox"/>		13. Returned and re-service of food			
<input checked="" type="checkbox"/>		14. Food in good condition, safe and unadulterated			
<input checked="" type="checkbox"/>		15. Food contact surfaces: clean and sanitized			

In	N/O-N/A		COS	MAJ	OUT
FOOD FROM APPROVED SOURCES					
<input checked="" type="checkbox"/>		16. Food obtained from approved source			
CORONAVIRUS GUIDANCE IMPLEMENTATION					
<input checked="" type="checkbox"/>		17. Takeout, Curbside Pickup, or Delivery Only			
		18. Social Distancing Implemented			
		19. Face Covering Used			
Highly Susceptible Populations					
		20. Licensed health care facilities/ public & private schools; prohibited foods not offered			
WATER/HOT WATER					
<input checked="" type="checkbox"/>		21. Hot and cold water available <u>>120°F</u>			
LIQUID WASTE DISPOSAL					
<input checked="" type="checkbox"/>		22. Sewage and wastewater properly disposed			
VERMIN					
<input checked="" type="checkbox"/>		23. No rodents, insects, birds, or animals			

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

#18 - WEAR MASKS

#19 - provide separation at point of sale area

Received by (Print)

Title

Email:

KYLIA AND MITCHELL420@GMAIL.COM

Specialist (Print)

Specialist (Signature)

Re-inspection Date: