



PLUMAS COUNTY
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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: 1/6/22

Facility Name: <u>Grocery Outlet</u>	Phone Number _____	PR ID # <u>1339</u>
Facility Site Address: <u>1715 E. MAIN</u>	City: <u>QUINCY</u>	Zip <u>95971</u>
Permit #: <u>21-1068</u>	Exp Date: <u>11/7/22</u>	Permit Holder: <u>Grocery Outlet</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	CO S	MAJ	OU T
DEMONSTRATION OF KNOWLEDGE				
<input checked="" type="checkbox"/>	1. Demonstration of knowledge; food safety certification			
Food Safety Cert Name: <u>Pre-Parpared</u> Exp. Date				
EMPLOYEE HEALTH & HYGIENIC PRACTICES				
<input checked="" type="checkbox"/>	2. Communicable disease; reporting, restrictions & exclusions			
<input checked="" type="checkbox"/>	3. No discharge from eyes, nose, and mouth			
<input checked="" type="checkbox"/>	4. Proper eating, tasting, drinking or tobacco use			
PREVENTING CONTAMINATION BY HANDS				
<input checked="" type="checkbox"/>	5. Hands clean and properly washed; gloves used properly			
<input checked="" type="checkbox"/>	6. Adequate handwashing facilities supplied & accessible			
TIME AND TEMPERATURE RELATIONSHIPS				
<input checked="" type="checkbox"/>	7. Proper hot and cold holding temperatures			
<input checked="" type="checkbox"/>	8. Time as a public health control; procedures & records			
<input checked="" type="checkbox"/>	9. Proper cooling methods			
<input checked="" type="checkbox"/>	10. Proper cooking time & temperatures			
<input checked="" type="checkbox"/>	11. Proper reheating procedures for hot holding			
PROTECTION FROM CONTAMINATION				
<input checked="" type="checkbox"/>	12. Returned and re-service of food			
<input checked="" type="checkbox"/>	13. Food in good condition, safe and unadulterated			
<input checked="" type="checkbox"/>	14. Food contact surfaces: clean and sanitized			

	FOOD FROM APPROVED SOURCES		
<input checked="" type="checkbox"/>	15. Food obtained from approved source		
<input checked="" type="checkbox"/>	16. Compliance with shell stock tags, condition, display		
<input checked="" type="checkbox"/>	17. Compliance with Gulf Oyster Regulations		
CONFORMANCE WITH APPROVED PROCEDURES			
<input checked="" type="checkbox"/>	18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan		
CONSUMER ADVISORY			
<input checked="" type="checkbox"/>	19. Consumer advisory provided for raw or undercooked foods		
Highly Susceptible Populations			
<input checked="" type="checkbox"/>	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	Temp	
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		

In	N/O-N/A	CO S	MAJ	OU T
SUPERVISION				
24. Person in charge present and performs duties				
PERSONAL CLEANLINESS				
25. Personal cleanliness and hair restraints				
GENERAL FOOD SAFETY REQUIREMENTS				
26. Approved thawing methods used, frozen food				
27. Food separated and protected				
28. Washing fruits and vegetables				
29. Toxic substances properly identified, stored, used				
FOOD STORAGE/ DISPLAY/ SERVICE				
30. Food storage; food storage containers identified				
31. Consumer self-service				
32. Food properly labeled & honestly presented				
EQUIPMENT/ UTENSILS/ LINENS				
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			
PHYSICAL FACILITIES			
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			
PERMANENT FOOD FACILITIES			
45. Floor, walls and ceilings: built, maintained, and clean			
46. No unapproved private homes/ living or sleeping quarters			
SIGNS/ REQUIREMENTS			
47. Signs posted; last inspection report available			
COMPLIANCE & ENFORCEMENT			
48. Plan Review			
49. Permits Available			
50. Impoundment			
51. Permit Suspension			

Received by (Print)	<u>Josh Wilson</u>	Title
Received by (Signature)	<u>JL Wilson</u>	
Specialist (Print)	<u>Pat Sanders</u>	Specialist (Signature) <u>K. Hall</u>
Re-inspection Date:		

FACILITY HAS A FOOD DIVERSION PLAN @ THIS TIME