



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: 2/3/22

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
<b>DEMONSTRATION OF KNOWLEDGE</b>				
<input checked="" type="checkbox"/>	1. Demonstration of knowledge; food safety certification			
Food Safety Cert Name: <u>Justin Rose</u>		Exp. Date <u>10/1/23</u>		
<b>EMPLOYEE HEALTH &amp; HYGIENIC PRACTICES</b>				
<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	<input checked="" type="checkbox"/>		
<b>PREVENTING CONTAMINATION BY HANDS</b>				
<input checked="" type="checkbox"/>	5. Hands clean and properly washed; gloves used properly			
<input checked="" type="checkbox"/>	6. Adequate handwashing facilities supplied & accessible			
<b>TIME AND TEMPERATURE RELATIONSHIPS</b>				
<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			
<b>PROTECTION FROM CONTAMINATION</b>				
<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			
In	N/O-N/A	CO S	MAJ	OU T

FOOD FROM APPROVED SOURCES			
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 <i>120° F</i> +	
<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		<input checked="" type="checkbox"/>
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	

Title manzor

Received by (Signature)

W. C. W.

Specialist (Print) PAT SANDERS

Specialist (Signature)

15 Feb

Re-inspection Date:

Facility Name: PUSD Quincy High School

FA ID # 150

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Date of Inspection: 2/3/23

OBSERVATIONS AND CORRECTIVE ACTIONS

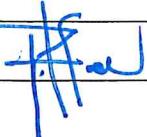
33. MONITOR DISHWASHER TO ENSURE ADEQUATE SANITIZER RESIDUAL @ 50 ppm. NO SANITIZER OBSERVED DURING INSPECTION.  
UNTIL REPAIRED UNIT CAN BE UTILIZED TO WASH & RINSE -  
SET UP 3-COMPARTMENT SINK TO MANUALLY SANITIZE UNTIL  
UNIT IS REPAIRED 3-COMP SANITIZER RESIDUAL min 100ppm

Received by (Print) Justin Rose

Title Manager

Received by (Signature) 

Specialist (Print) Pat Sanders

Specialist (Signature) 

Re-inspection Date: