



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: 4/28/23

Facility Name: <u>The Peak</u>	Phone Number: _____	PR ID #: <u>1437</u>
Facility Site Address: <u>7482 Hwy 89</u>	City: <u>Grange</u>	Zip: <u>96103</u>
Permit #: <u>22-113</u>	Exp Date: <u>10/5/23</u>	Permit Holder: <u>Kelly Hunter</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>					
1. Demonstration of knowledge; food safety certification					
Food Safety Cert Name: <u>non-prep</u>		Exp. Date			
<b>EMPLOYEE HEALTH &amp; HYGIENIC PRACTICES</b>					
2. Communicable disease; reporting, restrictions & exclusions					
3. No discharge from eyes, nose, and mouth					
4. Proper eating, tasting, drinking or tobacco use					
<b>PREVENTING CONTAMINATION BY HANDS</b>					
5. Hands clean and properly washed; gloves used properly					
6. Adequate handwashing facilities supplied & accessible					
<b>TIME AND TEMPERATURE RELATIONSHIPS</b>					
7. Proper hot and cold holding temperatures					
8. Time as a public health control; procedures & records					
9. Proper cooling methods					
10. Proper cooking time & temperatures					
11. Proper reheating procedures for hot holding					
<b>PROTECTION FROM CONTAMINATION</b>					
12. Returned and re-service of food					
13. Food in good condition, safe and unadulterated					
14. Food contact surfaces: clean and sanitized					
<b>FOOD FROM APPROVED SOURCES</b>					
15. Food obtained from approved source					
16. Compliance with shell stock tags, condition, display					
17. Compliance with Gulf Oyster Regulations					
<b>CONFORMANCE WITH APPROVED PROCEDURES</b>					
18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan					
<b>CONSUMER ADVISORY</b>					
19. Consumer advisory provided for raw or undercooked foods					
<b>Highly Susceptible Populations</b>					
20. Licensed health care facilities/ public & private schools; prohibited foods not offered					
<b>WATER/HOT WATER</b>					
21. Hot and cold water available Temp <u>&gt;120° F</u>					
<b>LIQUID WASTE DISPOSAL</b>					
22. Sewage and wastewater properly disposed					
<b>VERMIN</b>					
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		
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		
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		
<b>PHYSICAL FACILITIES</b>		OUT
39. Thermometers provided and accurate		
40. Wiping cloths: properly used and stored		
<b>PERMANENT FOOD 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>SIGNS/ REQUIREMENTS</b>		
45. Floor, walls and ceilings: built, maintained, and clean		
46. No unapproved private homes/ living or sleeping quarters		
<b>COMPLIANCE &amp; ENFORCEMENT</b>		
47. Signs posted; last inspection report available		
48. Plan Review		
49. Permits Available		
50. Impoundment		
51. Permit Suspension		

Received by (Print) <u>Kelly Hunter</u>	Title _____
Received by (Signature) <u>Kelly Hunter</u>	
Specialist (Print) <u>Dennis Eick</u>	Specialist (Signature) <u>Dennis Eick</u>
Re-inspection Date:	