



Date of Inspection: 9/21/23

Facility Name: <u>Folchi's Outpost</u>	Phone Number: <u>836-0820</u>	PR ID #: <u>146</u>
Facility Site Address: <u>7358 Hwy 89</u>	City: <u>Grass Valley</u>	Zip: <u>96103</u>
Permit #: <u>23-112</u>	Exp Date: <u>4/9/24</u>	Permit Holder: <u>Folchi LLC</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>Pending Confirmation of Manager Cert</u> Exp. Date: <u>12/25</u>				
<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 <u>125°F</u>			
	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			

In	N/O-N/A	COS	MAJ	OUT
<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>125°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		

		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		

Received by (Print) <u>Folchi</u>	Title
Received by (Signature) <u>[Signature]</u>	
Specialist (Print) <u>Dennis Eck</u>	Specialist (Signature) <u>[Signature]</u>
	Re-inspection Date: <u>Next Routine</u>

Facility Name:

Fidhi's Outpost

FA ID #

112

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Date of Inspection:

9/2/23

## OBSERVATIONS AND CORRECTIVE ACTIONS

- 1) Page Fidhi - Manager. - Need to confirm Manager Food Safety Cert. Individual on file for food safety cert was unknown by employee/absentee. Please send to [Quincyenv@countyofplumas.com](mailto:Quincyenv@countyofplumas.com)
- 2) Chili temp = 126°F - ~~the~~ temp was adjusted during inspection. Please monitor to keep > 135°F.
- 14) Dawn dish soap used for warewashing. Please incorporate a sanitizing soak of 100ppm Chlorine or 200ppm Ammonia Every 4 hrs for food contact surfaces.

Received by (Print)

Title

Received by (Signature)

Specialist (Print)

Specialist (Signature)

Re-inspection Date:

Next Routine