



PLUMAS COUNTY
pg 1 of ____
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: 6/26/23

Facility Name: 7 ELEVEN Phone Number _____ PR ID # 266
Facility Site Address: 349 E. SIERRA City: PORTOLA Zip 96122
Permit #: 22-233 Exp Date: 3/1/24 Permit Holder: 7 ELEVEN, INC. Type of Inspection: Routine

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				
✓	1. Demonstration of knowledge; food safety certification			
	Food Safety Cert Name: Brent Newbold Exp. Date 7/23/26			
EMPLOYEE HEALTH & HYGIENIC PRACTICES				
✓	2. Communicable disease; reporting, restrictions & exclusions			
✓	3. No discharge from eyes, nose, and mouth			
✓	4. Proper eating, tasting, drinking or tobacco use			
PREVENTING CONTAMINATION BY HANDS				
✓	5. Hands clean and properly washed; gloves used properly			
✓	6. Adequate handwashing facilities supplied & accessible			
TIME AND TEMPERATURE RELATIONSHIPS				
✓	7. Proper hot and cold holding temperatures Hot + Cold			
✓	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			
PROTECTION FROM CONTAMINATION				
✓	12. Returned and re-service of food			
✓	13. Food in good condition, safe and unadulterated			
✓	14. Food contact surfaces: clean and sanitized (Provide?)			

	FOOD FROM APPROVED SOURCES	
✓	15. Food obtained from approved source	
✓	16. Compliance with shell stock tags, condition, display	
✓	17. Compliance with Gulf Oyster Regulations	
CONFORMANCE WITH APPROVED PROCEDURES		
✓	18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan	
CONSUMER ADVISORY		
✓	19. Consumer advisory provided for raw or undercooked foods	
Highly Susceptible Populations		
✓	20. Licensed health care facilities/ public & private schools; prohibited foods not offered	
WATER/HOT WATER		
✓	21. Hot and cold water available Temp 120°F+	
LIQUID WASTE DISPOSAL		
✓	22. Sewage and wastewater properly disposed	
VERMIN		
✓	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) Brent Newbold Title Store Leader
Received by (Signature) Brent Newbold
Specialist (Print) Dennis Eck Specialist (Signature)
Re-inspection Date:

6. No soap in dispenser at hand washing sink - Corrected on site