



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: 12/8/23

Facility Name: <u>DONUT WHEEL</u>	Phone Number: _____	PR ID # <u>220</u>
Facility Site Address: <u>1690 E Main St.</u>	City: <u>Quincy</u>	Zip: <u>95971</u>
Permit #: <u>EXPIRED</u>	Exp Date: <u>10/1/23</u>	Permit Holder: <u>Pharoot Tracy</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
DEMONSTRATION OF KNOWLEDGE				
Food Safety Cert Name: <u>Pharoot Tracy</u> Exp Date: <u>2/7/24</u>				
EMPLOYEE HEALTH & HYGIENIC PRACTICES				
PREVENTING CONTAMINATION BY HANDS				
TIME AND TEMPERATURE RELATIONSHIPS				
PROTECTION FROM CONTAMINATION				

FOOD FROM APPROVED SOURCES	
CONFORMANCE WITH APPROVED PROCEDURES	
CONSUMER ADVISORY	
Highly Susceptible Populations	
WATER/HOT WATER	
LIQUID WASTE DISPOSAL	
VERMIN	

In	N/O-N/A	COS	MAJ	OUT
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SUPERVISION		OUT
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		

39. Thermometers provided and accurate		OUT
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) PHAROOT TRACY

Title

Received by (Signature) PTT

Specialist (Print) Dennis Eck

Specialist (Signature) [Signature]

Re-inspection Date:

Next Routine

Facility Name:

DONUT WHEEL

FA ID # 187

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Date of Inspection: 12/8/23

OBSERVATIONS AND CORRECTIVE ACTIONS

1) Obtain new food handler's card for employees.
- "Serv safe food handler" card

7) Fridge by temp ~45-46°F - have served or
keep check regularly to ensure less than 41°F.
- ~~remove items from~~

14) For food surfaces, use chlorine bleach + water
dilution at 100ppm or ammonia + water 200ppm

44) Keep personal items separate from retail items.

Received by (Print)

PHARAA THAKY

Title

Received by (Signature)

PJT

Specialist (Print)

Dennis Eck

Specialist (Signature)



Re-inspection Date:

Next Routine