



PLUMAS COUNTY  
pg 1 of 1  
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: 1/18/24

Facility Name: FEATHER RIVER COOP - PORTOLA Phone Number \_\_\_\_\_ PR ID # 130  
Facility Site Address: 60 N. Pine City: PORTOLA Zip 96122  
Permit #: 23-097 Exp Date: 8/5/24 Permit Holder: QUINCY NATURAL FOODS, 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
<b>DEMONSTRATION OF KNOWLEDGE</b>				
<input checked="" type="checkbox"/>	1. Demonstration of knowledge; food safety certification			
	Food Safety Cert Name: Sara Ludwig Exp. Date: 3/21/28			
<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			
<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 <i>hot + cold</i>			<input checked="" type="checkbox"/>
<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 <i>Sara Ludwig</i>			

FOOD FROM APPROVED SOURCES	COS MAJ OUT
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 120°F
<b>LIQUID WASTE DISPOSAL</b>	
22. Sewage and wastewater properly disposed	
<b>VERMIN</b>	
23. No rodents, insects, birds, or animals	

In	N/O-N/A	CO S	MAJ	OU T
<b>SUPERVISION</b>				
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) *Sara Ludwig* Title \_\_\_\_\_  
Received by (Signature) *Sara Ludwig*  
Specialist (Print) *Dennis Ecke* Specialist (Signature) *Sara Ludwig* Re-inspection Date *Next Routine*

41. Anti-siphon device is required on all threaded faucet bibs.  
7. Keep eye on items in deli case - front bottom items temp @ ~45-50°F  
Adjust as needed