



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: 4/22/23

Facility Name: <u>Two Girls One Trailer</u>	Phone Number <u>283-9133</u>	PR ID # _____
Facility Site Address: _____	City: <u>Quincy CA</u>	Zip _____
Permit #: <u>Derby MFF</u>	Exp Date: <u>11/10/28</u>	Permit Holder: <u>Shelli Braswell</u>
Type of Inspection: <u>Preparing</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	CO S	MAJ	OU T
<b>DEMONSTRATION OF KNOWLEDGE</b>				
✓	1. Demonstration of knowledge; food safety certification			
	Food Safety Cert Name: <u>Rochelle Braswell</u>	Exp. Date <u>11/10/28</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>Cold</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			

	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 <u>120°F+</u>
<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) Rochelle Braswell Title Owner  
 Received by (Signature) Rochelle Braswell  
 Specialist (Print) Dennis Eck Specialist (Signature) D.E. Re-inspection Date: 30 Days (Roster)  
 from Commercial Ops (D.E.)

OK to begin operation pending greywater tank + permit application approval!

Facility Name: Two Girls One Trailer

FA ID # \_\_\_\_\_

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Date of Inspection: 11/22/23

OBSERVATIONS AND CORRECTIVE ACTIONS

22) Must have self-contained waste water capacity 50% larger than freshwater tank- Will supplement trailer tank w/ portable greywater tank temporarily.

44) Install fly screens on service windows that is self-closing (magnetic or drop down)

Payment Received @ time of preparing inspection 11/22/23  
Check # 03  
- 9918

Received by (Print)

Rachelle Brazil

Title

Owner

Received by (Signature)

Rachelle Brazil

Specialist (Print)

Dennis Eick

Specialist (Signature)

D

Re-inspection Date:

30 days (Partue  
from start of  
operations  
(Dec. 1)