



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: 4/16/24

Facility Name: SAFeway # 262 Phone Number _____ PR ID # 32
Facility Site Address: 20 E Main St. City: Quincy Zip 95971
Permit #: 24-019 Food Exp Date: 4/25/24 Permit Holder: Safeway, 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				
<input checked="" type="checkbox"/>	1. Demonstration of knowledge; food safety certification			
Food Safety Cert Name: <u>Meagan Brany</u> Exp. Date				
EMPLOYEE HEALTH & HYGIENIC PRACTICES				
<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			
PREVENTING CONTAMINATION BY HANDS				
<input checked="" type="checkbox"/>	5. Hands clean and properly washed; gloves used properly			
<input checked="" type="checkbox"/>	6. Adequate handwashing facilities supplied & accessible			
TIME AND TEMPERATURE RELATIONSHIPS				
<input checked="" type="checkbox"/>	7. Proper hot and cold holding temperatures <u>hot & cold</u>			
<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			
PROTECTION FROM CONTAMINATION				
<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 <u>Brant</u>			

FOOD FROM APPROVED SOURCES	CO S	MAJ	OUT
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 <u>120°F</u>			
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	OUT
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				

CO S	MAJ	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) Meagan Brany

Title Store Director

Received by (Signature) MB

Specialist (Print) Dennis Ede

Specialist (Signature) S. A.

Re-inspection Date:

Next Routine

OBSERVATIONS AND CORRECTIVE ACTIONS

• Behind + underneath fryer needs to have general cleaning completed
- oil spilled on floor

• Top shelf of Deli Walk-in needs cleaning - Turkey breast

Package sealed with liquid -

• General Cleaning beneath equipment needed - Tables adjacent to Fryer.

* Facility unaware of SIB 1383, but ~~and~~ Community Assistance Network (CAN) receive food to reclaim at least 2x per week.

Received by (Print)

Meagan Brum

Title

Store Director

Received by (Signature)



Specialist (Print)

Dennis Fink

Specialist (Signature)



Re-inspection Date:

Next Routine