



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: 4/24/24

Facility Name: <u>Portola Frost</u>	City: <u>Portola</u>	Phone Number: _____	PR ID # <u>240</u>
Facility Site Address: <u>281 W. Sierra</u>	Zip: <u>96122</u>	Type of Inspection: <u>Routine</u>	
Permit #: <u>Expired</u>	Exp Date: <u>4/21/24</u>	Permit Holder: <u>Margaret Kahlon</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
<b>DEMONSTRATION OF KNOWLEDGE</b>				
	1. Demonstration of knowledge; food safety certification			
Food Safety Cert Name: <u>Need Food Cert Manager</u> Exp. Date: <u>30 days</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			
	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	COS	MAJ	OUT
<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			

PHYSICAL FACILITIES		OUT
	39. Thermometers provided and accurate	
	40. Wiping cloths: properly used and stored	
<b>PERMANENT FOOD 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) Arisbeth Silva

Title

Received by (Signature) Arisbeth Silva

Specialist (Print)

Specialist (Signature)

Re-inspection Date:

Next Routine

## OBSERVATIONS AND CORRECTIVE ACTIONS

- 1) Food certification on file is manager cert used for Mountain Market - ~~that~~ certification is only good for one facility. Please obtain food manager certification within 30 days. Obtain food handlers cards for employees within 30 days.
- 5) + 6) - Soap not available for front counter sink. Towels not available in rear handwash area, soap not available in bathroom. - COS -
- 7) Need vacuum breaker on cold spigot at utility sink.
- 14) Milkshake machine in front needs to be cleaned/sanitized at least every 4 hours. Residue observed on machine at time of inspection.  
- Corrected on site -

Received by (Print)

Title

Received by (Signature)

Arisbeth Silva

Specialist (Print)

Dennis Eck

Specialist (Signature)



Re-inspection Date:

Next Routine