



PLUMAS COUNTY
ENVIRONMENTAL HEALTH DIVISION
FOOD SAFETY EVALUATION REPORT
270 County Hospital Rd., Ste 127 Quincy, CA 95971
Phone: (530) 283-6355 FAX (530) 283-6241

pg 1 of 2

Date of Inspection: 12/9/24

Facility Name: <u>PENINSULA MARKET</u>	Phone Number <u>596-3500</u>	PR ID # <u>225</u>
Facility Site Address: <u>309 Peninsula Dr.</u>	City: <u>Lake Almanor</u>	Zip <u>96137</u>
Permit #: <u>24-192</u>	Exp Date: <u>2/15/25</u>	Permit Holder: <u>Ramesh Turel</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				
X	1. Demonstration of knowledge; food safety certification			
Food Safety Cert Name: <u>Danica Luan</u> Exp. Date <u>11/5/27</u>				
EMPLOYEE HEALTH & HYGIENIC PRACTICES				
X	2. Communicable disease; reporting, restrictions & exclusions			
X	3. No discharge from eyes, nose, and mouth			
X	4. Proper eating, tasting, drinking or tobacco use			
PREVENTING CONTAMINATION BY HANDS				
X	5. Hands clean and properly washed; gloves used properly			
X	6. Adequate handwashing facilities supplied & accessible			
TIME AND TEMPERATURE RELATIONSHIPS				
X	7. Proper hot and cold holding temperatures			
X	8. Time as a public health control; procedures & records			
X	9. Proper cooling methods			
X	10. Proper cooking time & temperatures			
X	11. Proper reheating procedures for hot holding			
PROTECTION FROM CONTAMINATION				
X	12. Returned and re-service of food			
X	13. Food in good condition, safe and unadulterated			
X	14. Food contact surfaces: clean and sanitized			

In	N/O/N/A	FOOD FROM APPROVED SOURCES	COS	MAJ	OUT
X	15. Food obtained from approved source				
X	16. Compliance with shell stock tags, condition, display				
X	17. Compliance with Gulf Oyster Regulations				
CONFORMANCE WITH APPROVED PROCEDURES					
X	18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan				
X	SB 13 83 Food Diversion Program				
CONSUMER ADVISORY					
X	19. Consumer advisory provided for raw or undercooked foods				
Highly Susceptible Populations					
X	20. Licensed health care facilities/ public & private schools; prohibited foods not offered				
WATER/HOT WATER					
X	21. Hot and cold water available				
		Temp <u>120°F+</u>			
LIQUID WASTE DISPOSAL					
X	22. Sewage and wastewater properly disposed				
VERMIN					
X	23. No rodents, insects, birds, or animals				

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	X	
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	X
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) Sarah Robinson

Title

Received by (Signature)

Specialist (Print) Pat Sanders

Specialist (Signature) [Signature]

Re-inspection Date:

Facility Name: PENINSULA MARKET

FAID # 225

Pg 2 of 2

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OBSERVATIONS AND CORRECTIVE ACTIONS

34. DISHWASHER NOT SANITIZING @ TIME OF INSPECTION - UNTIL REPAIRED / RE-SUPPLY
W/ SANITIZER - UTILIZE DISHWASHER FOR WASH & RINSE CYCLES - SET UP A COMPARTMENT
IN 3-COMPARTMENT SINK W/ 100PPM MIN SANITIZER & MANUALLY SANITIZE B
LET AIR DRY - OBTAIN TEST STRIPES

45. INCREASE ROUTINE CLEANING TO PREVENT BUILDUP OF FOOD DERRIS -
PAY SPECIAL ATTENTION TO AREAS WHERE EQUIPMENT

Received by (Print)

Sergio Robinson

Title

Received by (Signature)

Sergio Robinson

Specialist (Print)

Pat Sanders

Specialist (Signature)

Pat Sanders

Re-inspection Date: