



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

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Date of Inspection: 12/13/24

Facility Name: THE LOADED TATER SHACK Phone Number \_\_\_\_\_  
Facility Site Address: 2115 E. Main City: Quincy Zip: 95971 PR ID # 2220  
Permit #: Pending Exp Date: \_\_\_\_\_ Permit Holder: Dale Reed Jr. Type of Inspection: Pre-opening

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>Dale Reed</u>	Exp. Date <u>9/23/29</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 <u>Reash</u>			

In	N/O-N/A	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				
✓	SB 13 83 Food Diversion Program				
<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>				<u>55°F</u>
<b>LIQUID WASTE DISPOSAL</b>					
✓	22. Sewage and wastewater properly disposed				
<b>VERMIN</b>					
✓	23. No rodents, insects, birds, or animals				

SUPERVISION	OUT
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) Dale Reed Title \_\_\_\_\_

Received by (Signature) Jah Eshu

Specialist (Print) Dennis Eshu Specialist (Signature) Dale Reed

47) Please post

Re-inspection Date:

1st Routine  
30 days

Facility Name:

THE LOADED TATER SHACK

FA ID # 1352

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Date of Inspection: 12/13/24

OBSERVATIONS AND CORRECTIVE ACTIONS

45) Please get self closing screens for service window.

47) Install signage on exterior of trailer - Business name, city, state, zip.

3" minimum

1" minimum

- permitted to open -

Received by (Print)

Dale Reed

Title

Received by (Signature)



Specialist (Print)

Dennis Ede

Specialist (Signature)

Re-inspection Date:

1st Routine  
30 days