



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: 12/23/21

Facility Name: <u>THE TROUT'S CAFE</u>	Phone Number: _____	PR ID # <u>Pending</u>
Facility Site Address: <u>167 E. Sierra Ave</u>	City: <u>Portola</u>	Zip: <u>96122</u>
Permit #: <u>Pending</u>	Exp Date: _____	Permit Holder: <u>Miguel Rodriguez</u>
		Type of Inspection: <u>Preopening</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					
<input checked="" type="checkbox"/>					
1. Demonstration of knowledge; food safety certification					
Food Safety Cert Name: <u>obtain within 60 days</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>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					

In	N/O	N/A	COS	MAJ	OUT
FOOD FROM APPROVED SOURCES					
<input checked="" type="checkbox"/>					
15. Food obtained from approved source					
<input checked="" type="checkbox"/>					
16. Compliance with shell stock tags, condition, display					
<input checked="" type="checkbox"/>					
17. Compliance with Gulf Oyster Regulations					
<input checked="" type="checkbox"/>					
18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan					
<input checked="" type="checkbox"/>					
SB 13 83 Food Diversion Program					
CONSUMER ADVISORY					
<input checked="" type="checkbox"/>					
19. Consumer advisory provided for raw or undercooked foods					
Highly Susceptible Populations					
<input checked="" type="checkbox"/>					
20. Licensed health care facilities/ public & private schools; prohibited foods not offered					
WATER/HOT WATER					
<input checked="" type="checkbox"/>					
21. Hot and cold water available Temp <u>128°F</u>					
LIQUID WASTE DISPOSAL					
<input checked="" type="checkbox"/>					
22. Sewage and wastewater properly disposed					
VERMIN					
<input checked="" type="checkbox"/>					
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		
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		
PERMANENT FOOD FACILITIES		
41. Plumbing: proper backflow devices		<input checked="" type="checkbox"/>
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)

Title

Received by (Signature)

Miguel Rodriguez

Specialist (Print)

Dennis Eck

Specialist (Signature)

[Signature]

Re-inspection Date:

1st Routine 30 days
CHECK #1021

41) Install vacuum breaker on utility sink
Permitted to open pending approval from City of Portola.