



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: 1/27/25

Facility Name: <u>SUBWAY QUINCY</u>	Phone Number: <u>283 3303</u>	PR ID #: <u>271</u>
Facility Site Address: <u>23 CRESCENT ST</u>	City: <u>QUINCY</u>	Zip: <u>95971</u>
Permit #: <u>24-238</u>	Exp Date: <u>9/16/25</u>	Permit Holder: <u>Ravi Gundinada</u>
		Type of Inspection: <u>COMPLAINT</u>

See reverse side for the code sections and general requirements that correspond to each violation listed below

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>Christopher Freeman</u> Exp. Date: <u>9/9/29</u>				
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>Quin 200ppm</u>				

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"/>				
CONFORMANCE WITH APPROVED PROCEDURES				
<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>108F</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				

	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	

	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) <u>Chris Freeman</u>	Title
Received by (Signature) <u>[Signature]</u>	
Specialist (Print) <u>Dennis Eck</u>	Specialist (Signature) <u>[Signature]</u>
Re-inspection Date: <u>next Rantur</u>	

2) Keep eye on Hot water or adjust to reach 120°F+.

Facility Name:

Subway Quincy

FA ID #

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Date of Inspection: 1/27/25

OBSERVATIONS AND CORRECTIVE ACTIONS

Complaint inspection -

- Manager indicated complainant said symptoms were near immediate.
- No indication of mishandling of food items.
- No employees have been sick/have had symptoms/called out of work.
- All temps ~~are~~ for food holding are within required tolerances.
- Immediate symptoms suggest potential toxin-forming bacterium or allergen present → no indication of either of those
- ~~allergens~~ are present (no obvious common allergens)

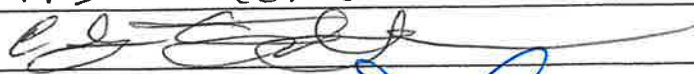
Good sanitation is observed at time of inspection.

Received by (Print)

Chris Freeman

Title

Received by (Signature)



Specialist (Print)

Dennis Fick

Specialist (Signature)



Re-inspection Date:

Next Routine

Log No. - 25-03

PLUMAS COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

REQUEST FOR SERVICE

Animals

Food

Garbage

Housing

Insects

Rodents

Sewage

Water

U.S.T.

Hazardous Waste

Other

Complaint Against:

Address:

APN:

Telephone:

Nature of Request:

Subway

23 Crescent St. Highway 70
Quincy, CA 95971

530-283-3303 - (disconnected?)

Got Food Poisoning, called, but
was disconnected Footlong Turkey - All veggies
honey mustard with mayo, still have sandwich
manager accused her of trying to manipulate
when she entered the store to Express concern.

Date Reported: 1-24-25

Received By: Sean Tillman

Letter

☐

Phone

☒

Visit

☐

Date Investigated:

1/27/25

RESULTS

No obvious signs of hazards that potentially
cause a food borne illness

- See inspection report -

Action Taken

Informed Complainant that an inspection was performed
w/ no obvious signs of conditions that could cause
food borne illness and advised seeing doctor if still ill.
- Complaint Closed -

Date Complainant Notified: _____