



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: 2/3/25

Facility Name: <u>Mi CASITA</u>	Phone Number: <u>258-1879</u>	PR ID #: <u>156</u>
Facility Site Address: <u>686 MAIN</u>	City: <u>CITRISTOR</u>	Zip: <u>96020</u>
Permit #: <u>25-123</u>	Exp Date: <u>4/4/25</u>	Permit Holder: <u>MARQUEZ - FLORES</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
<b>DEMONSTRATION OF KNOWLEDGE</b>				
<input checked="" type="checkbox"/>	1. Demonstration of knowledge; food safety certification			
Food Safety Cert Name: <u>LEONEL Flores</u> Exp. Date <u>6/4/25</u>				
<b>EMPLOYEE HEALTH &amp; HYGIENIC PRACTICES</b>				
<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			
<b>PREVENTING CONTAMINATION BY HANDS</b>				
<input checked="" type="checkbox"/>	5. Hands clean and properly washed; gloves used properly			
<input checked="" type="checkbox"/>	6. Adequate handwashing facilities supplied & accessible			
<b>TIME AND TEMPERATURE RELATIONSHIPS</b>				
<input checked="" type="checkbox"/>	7. Proper hot and cold holding temperatures			
<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			
<b>PROTECTION FROM CONTAMINATION</b>				
<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	FOOD FROM APPROVED SOURCES	COS	MAJ	OUT
<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				
<b>CONFORMANCE WITH APPROVED PROCEDURES</b>					
<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				
<b>CONSUMER ADVISORY</b>					
<input checked="" type="checkbox"/>	19. Consumer advisory provided for raw or undercooked foods				
<b>Highly Susceptible Populations</b>					
<input checked="" type="checkbox"/>	20. Licensed health care facilities/ public & private schools; prohibited foods not offered				
<b>WATER/HOT WATER</b>					
<input checked="" type="checkbox"/>	21. Hot and cold water available				
Temp <u>120°F+</u>					
<b>LIQUID WASTE DISPOSAL</b>					
<input checked="" type="checkbox"/>	22. Sewage and wastewater properly disposed				
<b>VERMIN</b>					
<input checked="" type="checkbox"/>	23. No rodents, insects, birds, or animals				

<b>SUPERVISION</b>		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		<input checked="" type="checkbox"/>
36. Equipment, utensils and linens: storage and use		
37. Vending machines		
38. Adequate ventilation and lighting; designated areas, use		

<b>PHYSICAL FACILITIES</b>		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>SIGNS/ REQUIREMENTS</b>		
45. Floor, walls and ceilings: built, maintained, and clean		
46. No unapproved private homes/ living or sleeping quarters		
<b>COMPLIANCE &amp; ENFORCEMENT</b>		
47. Signs posted; last inspection report available		
48. Plan Review		
49. Permits Available		
50. Impoundment		
51. Permit Suspension		

Received by (Print)	Title		
Received by (Signature) <u>Elizabeth M. Flores</u>			
Specialist (Print) <u>PAT SANDERS</u>	Specialist (Signature) <u>Pat Sanders</u>	Re-inspection Date:	

Facility Name: <u>Mi CASITA</u>	FAID # <u>156</u>	Pg <u>2</u> of <u>2</u>
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#### OBSERVATIONS AND CORRECTIVE ACTIONS

35.- CLEAN RACKS IN WALK-IN REFRIGERATION UNIT TO REMOVE ACCUMULATION OF FOOD DEBRIS.

- CLEAN CAN OPERATE IN FOOD STORAGE AREA ON A ROUTINE BASIS TO PREVENT ACCUMULATION OF FOOD DEBRIS.

- None: Floor is prop algae, has been recently sealed - chipping has already occurred. Repair areas as needed to expedite cleaning.

- Submit new current & valid food safety certification to E.H. upon request.

Received by (Print)

Title

Received by (Signature)



Specialist (Print) PAT SANDERS

Specialist (Signature) 

Re-inspection Date: