



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 1

Date of Inspection: 24 APR 20

Facility Name: <u>LENA'S CANTINA</u>	Phone Number <u>832-5360</u>	PR ID # <u>192</u>
Facility Site Address: <u>165 E STREET</u>	City: <u>POMONA</u>	Zip <u>96122</u>
Permit #: <u>20-159</u>	Exp Date: <u>10/30/24</u>	Permit Holder: <u>LENA NELSON</u>
		Type of Inspection: SPECIAL

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				
1. Demonstration of knowledge; food safety certification <input checked="" type="checkbox"/>				
Food Safety Cert Name: <u>LENA NELSON</u>	Exp. Date: <u>11/10/24</u>			
2. All food handlers have valid Food Handler Cards <input checked="" type="checkbox"/>				
EMPLOYEE HEALTH & HYGIENIC PRACTICES				
3. Communicable disease; reporting, restrictions & exclusions <input checked="" type="checkbox"/>				
4. No discharge from eyes, nose, and mouth <input checked="" type="checkbox"/>				
5. Proper eating, tasting, drinking or tobacco use <input checked="" type="checkbox"/>				
PREVENTING CONTAMINATION BY HANDS				
6. Hands clean and properly washed; gloves used properly <input checked="" type="checkbox"/>				
7. Adequate handwashing facilities supplied & accessible <input checked="" type="checkbox"/>				
TIME AND TEMPERATURE RELATIONSHIPS				
8. Proper hot and cold holding temperatures <input checked="" type="checkbox"/>				
9. Time as a public health control; procedures & records <input checked="" type="checkbox"/>				
10. Proper cooling methods <input checked="" type="checkbox"/>				
11. Proper cooking time & temperatures <input checked="" type="checkbox"/>				
12. Proper reheating procedures for hot holding <input checked="" type="checkbox"/>				
PROTECTION FROM CONTAMINATION				
13. Returned and re-service of food <input checked="" type="checkbox"/>				
14. Food in good condition, safe and unadulterated <input checked="" type="checkbox"/>				
15. Food contact surfaces: clean and sanitized <input checked="" type="checkbox"/>				

In	N/O-N/A	COS	MAJ	OUT
FOOD FROM APPROVED SOURCES				
16. Food obtained from approved source <input checked="" type="checkbox"/>				
CORONAVIRUS GUIDANCE IMPLEMENTATION				
17. Takeout, Curbside Pickup, or Delivery Only <input checked="" type="checkbox"/>				
18. Social Distancing Implemented <input checked="" type="checkbox"/>				
19. Face Covering Used <input checked="" type="checkbox"/>				
Highly Susceptible Populations				
20. Licensed health care facilities/ public & private schools; prohibited foods not offered <input checked="" type="checkbox"/>				
WATER/HOT WATER				
21. Hot and cold water available <input checked="" type="checkbox"/>				
LIQUID WASTE DISPOSAL				
22. Sewage and wastewater properly disposed <input checked="" type="checkbox"/>				
VERMIN				
23. No rodents, insects, birds, or animals <input checked="" type="checkbox"/>				

FOOD SAFETY AND CORONAVIRUS (COVID-19) SPECIAL INSPECTION OBSERVATIONS

TAKEOUT - THROUGH OPERATIONS INDOORS

Received by (Print)

Title

NO SIGNATURE DUE TO COVID PROTOCOL

Email:

LENA434@gmail.com

Specialist (Print)

Rob Robbette

Specialist (Signature)

Re-inspection Date: