



Date of Inspection: 3/3/2023

Facility Name: Feather River College Phone Number _____ PR ID # 129
 Facility Site Address: 570 Golden Eagle City: Quincy Zip 95971
 Permit #: 22-096 Exp Date: 6/1/23 Permit Holder: FRC Type of Inspection: Routine

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				
Food Safety Cert Name: <u>Sean Conroy</u> Exp. Date <u>9/3/27</u>				
EMPLOYEE HEALTH & HYGIENIC PRACTICES				
✓				
2. Communicable disease; reporting, restrictions & exclusions				
✓				
3. No discharge from eyes, nose, and mouth				
✓				
4. Proper eating, tasting, drinking or tobacco use				
PREVENTING CONTAMINATION BY HANDS				
✓				
5. Hands clean and properly washed; gloves used properly				
✓				
6. Adequate handwashing facilities supplied & accessible				
TIME AND TEMPERATURE RELATIONSHIPS				
✓				
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				
PROTECTION FROM CONTAMINATION				
✓				
12. Returned and re-service of food				
✓				
13. Food in good condition, safe and unadulterated				
✓				
14. Food contact surfaces: clean and sanitized				

In	N/O-N/A	COS	MAJ	OUT
FOOD FROM APPROVED SOURCES				
✓				
15. Food obtained from approved source				
✓				
16. Compliance with shell stock tags, condition, display				
✓				
17. Compliance with Gulf Oyster Regulations				
CONFORMANCE WITH APPROVED PROCEDURES				
✓				
18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan				
CONSUMER ADVISORY				
✓				
19. Consumer advisory provided for raw or undercooked foods				
Highly Susceptible Populations				
✓				
20. Licensed health care facilities/ public & private schools; prohibited foods not offered				
WATER/HOT WATER				
✓				
21. Hot and cold water available Temp <u>150°F</u>				
LIQUID WASTE DISPOSAL				
✓				
22. Sewage and wastewater properly disposed				
VERMIN				
✓				
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		

39. Thermometers provided and accurate		OUT
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) _____ Title Chef
 Received by (Signature) _____
 Specialist (Print) Jerry Lopez Specialist (Signature) _____ Re-inspection Date Next routine

OBSERVATIONS AND CORRECTIVE ACTIONS

45. Please replace cove at floor-wall juncture next to cook line. Please repair / upgrade floor in walk-in refrig to remove rust and flaking. Continue extra effort to keep clean until repairs can be made.

Facility was found to be clean and well managed. Thank you for your commitment to food safety.

Received by (Print)

[Signature]

Title

3/2/23 chef

Received by (Signature)

Specialist (Print)

Jerry

Specialist (Signature)

[Signature]

Re-inspection Date:

next routine