



PLUMAS COUNTY  
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ENVIRONMENTAL HEALTH DIVISION  
FOOD SAFETY EVALUATION REPORT  
270 County Hospital Rd., Ste 127 Quincy, CA 95971  
Phone: (530) 283-6355 FAX (530) 283-6241

Date of Inspection: 9/26/23

Facility Name: <u>SUBWAY SANDWICHES Portola #38306</u>	Phone Number: _____	PR ID # <u>529</u>
Facility Site Address: <u>24 W SIERRA ST</u>	City: <u>Portola</u>	Zip: <u>96122</u>
Permit #: <u>22-449</u>	Exp Date: <u>9/16/23</u> <u>EXPIRED</u>	Permit Holder: <u>Ravi Gundamedu</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	CO S	MAJ	OUT
<b>DEMONSTRATION OF KNOWLEDGE</b>				
1. Demonstration of knowledge; food safety certification				
Food Safety Cert Name: <u>Mary Merkley</u> Exp. Date <u>5/20/24</u>				
<b>EMPLOYEE HEALTH &amp; HYGIENIC PRACTICES</b>				
2. Communicable disease; reporting, restrictions & exclusions				
3. No discharge from eyes, nose, and mouth				
4. Proper eating, tasting, drinking or tobacco use				
<b>PREVENTING CONTAMINATION BY HANDS</b>				
5. Hands clean and properly washed; gloves used properly				
6. Adequate handwashing facilities supplied & accessible				
<b>TIME AND TEMPERATURE RELATIONSHIPS</b>				
7. Proper hot and cold holding temperatures <u>HOT OK</u>				
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				
<b>PROTECTION FROM CONTAMINATION</b>				
12. Returned and re-service of food				
13. Food in good condition, safe and unadulterated				
14. Food contact surfaces: clean and sanitized <u>good</u> .				

<b>FOOD FROM APPROVED SOURCES</b>		OUT
15. Food obtained from approved source		
16. Compliance with shell stock tags, condition, display		
17. Compliance with Gulf Oyster Regulations		
<b>CONFORMANCE WITH APPROVED PROCEDURES</b>		
18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan		
<b>CONSUMER ADVISORY</b>		
19. Consumer advisory provided for raw or undercooked foods		
<b>Highly Susceptible Populations</b>		
20. Licensed health care facilities/ public & private schools; prohibited foods not offered		
<b>WATER/HOT WATER</b>		
21. Hot and cold water available Temp <u>140°F</u>		
<b>LIQUID WASTE DISPOSAL</b>		
22. Sewage and wastewater properly disposed		
<b>VERMIN</b>		
23. No rodents, insects, birds, or animals		

In	N/O-N/A	CO S	MAJ	OUT
<b>SUPERVISION</b>				
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				
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)

Mary Merkley

Specialist (Print)

Dennis Eck

Specialist (Signature)

Re-inspection Date:

Not Required

Facility Name: Subway Portola

FAID # 449

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Date of Inspection: 9/28/23

OBSERVATIONS AND CORRECTIVE ACTIONS

1) Foods held in front line refrigeration temps at 42-48°F  
- Keep covers on when not serving customers to maintain  
below 41°F.

2) Hot water at 114°F -(may be because sinks were just filled)  
Please take temperature to ensure >120°F and adjust  
as needed

3) Ice machine hopper surfaces observed to be dirty  
Please clean.

Received by (Print)

Title

Received by (Signature)

Mary Murphy

Specialist (Print)

Dennis E. K.

Specialist (Signature)

D. J.

Re-inspection Date:

Next Routine