## LASSEN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

1445 Paul Bunyan Road, Susanville, CA 96130 Phone: (530) 251-8528 Fax: (530) 251-2668

## **Cottage Food Operation Official Inspection Report**

DBA/Name: Brandy's Trassure Chept						Date: 3-18-19	Time	e: 1	0;00	91
Address: 135 Ash st. susaville CA 96136 Recheck Date:										
Owner/Operator: Grandy Hure # Violation Correction Date:										
□ Class A Class B Facility #:					Routin	e □ Complaint □ Reinspection	X	nitial	Inspe	ction
Violations pose a threat to public health and must b	e corre	cted. U	ncorrec	ted viol	iations ma	ay warrant closure of the Cottage Food Ope	ration	(CFO)	. See re	verse
side for the California Retall Food	d Code	section	s and g	eneral i	requireme	ents that correspond to each violation listed	below			
IN - In Compliance OUT - Out of Compliance			Commence of the	THE PERSON NAMED IN			T. Inches	90/30/202	a model to have	THE REAL PROPERTY.
Demonstration of Knowledge	IN	OUT	NA	NO	Facili	ty Requirements	RN	OUT	NA	N/O
Self-certification checklist submitted (Class A)     Self-certification checklist submitted (Class A)     Self-certification checklist submitted (Class A)	-		-		7a. Adequate storage for food and related equipment		$ \chi $			
	X		500000000000000000000000000000000000000	(37.5 kg)			+ +			
Employee Health & Hygiene Practices  2a. No ill employees or workers	1	A STATE OF		00000		ood preparation occurs in private kitchen CFO	X			
2b. No smoking in CFO	X		-	-			1			
2c. Employees shall not contaminate food	-		-			FO located in private dwelling /operator sidence	1			
Prevent Contamination by Hands	$\wedge$	4 2 7	PROPERTY.		Label			<b>我那</b>		報告を表
3a. Hand washing station stocked and available	1		SHEYS, SALES	NEWSTAN	- CONTROL OF THE PARTY OF THE P	flade in a Home Kitchen" on package	x	201200	CHEST WHEN	15000 Sec. 17.
3b. Hands washed prior to food preparation						ommon name of product on package	1.0			
3c. Proper glove use	A		X			ame of CFO on package	1.7			
Approved food Item	14572		A SECTION			gredients listed on package	<b> </b>			
Food prepared from approved food list only				OWNERS.		egistration or permit number on package	3			
Water	10000	10 Sup	900000	00200	Verm		1	SIGN	53430	
5. Potable water source	7			OR COLUMN	STATE OF THE OWNER, TAXABLE	o rodents, insects or animals within CFO	1	1000	MAKE SHIPS	200 TOOL
Protection from Contamination				36.6	MINISTER STATE OF THE PARTY OF	pliance and Enforcement		500000	( Alexandre	STATE OF THE PARTY OF
	7	L/SEPTEMBER	200	SOURCES.	ST PARTY AND ADDRESS.	CFO operating with valid permit or	(BACKLOS)	Month	(ACCEPTED	SECTION 1
6a. Food free from contamination and adulteration	X				regist	The state of the s	X			
6b. Kitchen equipment and utensils clean and in	,				10b. A	Approved direct sales to consumers	X			
good repair	X				10c. A	Approved indirect sales in county of origin	X			
6c. Food contact surfaces are cleaned and	,				10d. A	Approved number of employees	X			
sanitized	X				10e. N	Meets gross sales requirements	13			
6e. No infants, small children, or pets in kitchen	1				Other	•	2.0			
during CFO hours							$\perp$			
before uses	2,	Clea	a it	wit	m b	king Soda. Thought C	lean	M	ikur	د
100 1 1 0										
· Affrond water source										
· Water Temperature	120	f (0	k)							
·.										
· Refridgerator 36.57	(d)					**				
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					727	4				

Environmental Health Specialist

Received By:

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