



COUNTY OF LAKE HEALTH SERVICES DEPARTMENT

Division of Environmental Health

Lakeport: 922 Bevins Court, Lakeport, CA 95453-9739
Telephone 707/ 263-1164 FAX: 263-1681

FOOD SAFETY INSPECTION REPORT

Facility Name:		Address:				City:		Zip Code:	
Permit #:		Exp Date:		Permit Holder:		Type of Inspection: <input type="checkbox"/> Routine <input type="checkbox"/> Re-inspection <input type="checkbox"/> Complaint <input type="checkbox"/> Change of Ownership <input type="checkbox"/> Pre-opening			
DEMONSTRATION OF KNOWLEDGE		COS	MAJ	OUT	PTS	PTS Lost		PROTECTION FROM CONTAMINATION	
In	Out								
N/O				<input type="checkbox"/>	2			In	N/A
1. Demonstration of knowledge; food safety certification								12. Returned and re-service of food	
Food Safety Cert Name:		Exp. Date						In	N/A
								13. Food in good condition, safe and unadulterated	
								In	N/A
								14. Food contact surfaces: clean and sanitized	
								Sanitizer Type: <input type="checkbox"/> Chlorine <input type="checkbox"/> Quaternary Ammonium <input type="checkbox"/> Hot Water <input type="checkbox"/> Other	
								Sanitizer Concentration (ppm):	
								FOOD FROM APPROVED SOURCES	
EMPLOYEE HEALTH & HYGIENIC PRACTICES								In	N/A
In					4			15. Food obtained from approved source	
2. Communicable disease; reporting, restrictions & exclusions								In	N/O
In	N/O				2			16. Compliance with shell stock tags, condition, display	
3. No discharge from eyes, nose, and mouth								N/A	
In	N/O				2			In	Out
4. Proper eating, drinking or tobacco use								N/O	N/A
								17. Compliance with Gulf Oyster Regulations	
								CONFORMANCE WITH APPROVED PROCEDURES	
PREVENTING CONTAMINATION BY HANDS								In	N/A
In	N/O				4			18. Compliance with variance, specialized process, & HACCP Plan	
5. Hands clean and properly washed; gloves used properly								CONSUMER ADVISORY	
In					2			In	N/O
6. Adequate hand washing facilities supplied & accessible								19. Consumer advisory provided for raw or undercooked foods	
								In	N/A
								20. Licensed health care facilities/ public & private schools; prohibited foods not offered	
								WATER/ HOT WATER	
TIME AND TEMPERATURE RELATIONSHIPS								In	
In	N/O				4/2			21. Hot and cold water available	
7. Proper hot and cold holding temperatures								Hot water temp: _____	
In	N/O				4/2			LIQUID WASTE DISPOSAL	
8. Time as a public health control; procedures & records								In	
In	N/O				4			22. Sewage and wastewater properly disposed	
9. Proper cooling methods								VERMIN	
In	N/O				4			In	
10. Proper cooking time & temperatures								23. No rodents, insects, birds, or animals	
In	N/O				4				
11. Proper reheating procedures for hot holding									

Major violations pose an imminent risk to health and must be corrected immediately or may lead to closure of facility. Minor violations warrant correction by the next routine inspection or established schedule. Any change in operation, equipment, or remodeling requires pre-approval from the County of Lake Environmental Health Division.

TOTAL SCORE : _____

SUPERVISION		OUT	PTS	PTS Lost	EQUIPMENT/ UTENSILS/ LINENS (Cont.)		OUT	PTS	PTS Lost
24. Person in charge present and performs duties			1		39. Thermometers provided and accurate within 2 degrees			1	
PERSONAL CLEANLINESS					40. Wiping cloths: properly used and stored			1	
25. Personal cleanliness and hair restraints			1		PHYSICAL FACILITIES				
GENERAL FOOD SAFETY REQUIREMENTS					41. Plumbing: proper backflow devices			1	
26. Approved thawing methods used – frozen foods			1		42. Garbage and refuse properly disposed; facilities maintained			1	
27. Food separated and protected			1		43. Toilet facilities: properly constructed, supplied, cleaned			1	
28. Washing fruits and vegetables			1		44a. Premises			1	
29. Toxic/ injurious substances properly identified, stored, and used			1		44b. Personal/cleaning items				
FOOD STORAGE/ DISPLAY/ SERVICE					44c. Vermin-proofing				
30. Food storage; food storage containers identified			1		PERMANENT FOOD FACILITIES				
31. Consumer self-service			1		45. Floor, walls and ceilings: built, maintained, and clean			1	
32. Food properly labeled & honestly presented			1		46. No unapproved private homes/ living or sleeping quarters			1	
EQUIPMENT/ UTENSILS/ LINENS					SIGNS/ REQUIREMENTS				
33. Nonfood contact surfaces clean			1		47. Signs posted; last inspection report available			1	
34. Ware washing facilities: installed, maintained, and used - test strips			1		COMPLIANCE & ENFORCEMENT				
35. Equipment/ utensils approved; installed; clean; good repair, capacity			1		48. Plan Review				
36. Equipment, utensils and linens: storage and use			1		49. Permits Available				
37. Vending machines			1		50. Impoundment				
38. Adequate ventilation and lighting; designated areas, usage			1		51. Permit Suspension				

In = In compliance Out = Out of Compliance ☒ = Item marked are not in compliance N/O = Not observed N/A = Not applicable
 MAJ = Major violation COS = Corrected on-site PTS = Points PTS Lost = Points lost

Received by (Print): _____ (Signature): _____

Specialist (Print): _____ (Signature): _____ Title: _____

CMHC Entry initials & date: _____ Current Date _____ Date of Last Inspection _____ **Re-inspection Date (on or after):** _____

