



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

Date of Inspection: 5/22/20

Facility Name: <u>Fuel Star #2 - MOBIL</u>	Phone Number: _____	PR ID # <u>139</u>
Facility Site Address: <u>1066 Crescent St.</u>	City: <u>Quincy</u>	Zip <u>95971</u>
Permit #: <u>20-104</u>	Exp Date: <u>2/11/21</u>	Permit Holder: <u>Ghulam Faraed</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					
<input checked="" type="checkbox"/>		1. Demonstration of knowledge; food safety certification	█	█	
		Food Safety Cert Name: <u>Debbie Lewis</u>	Exp. Date <u>1/20/21</u>		
<input checked="" type="checkbox"/>		2. All food handlers have valid Food Handler Cards			
EMPLOYEE HEALTH & HYGIENIC PRACTICES					
<input checked="" type="checkbox"/>	█	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		█	
PREVENTING CONTAMINATION BY HANDS					
<input checked="" type="checkbox"/>		6. Hands clean and properly washed; gloves used properly			
<input checked="" type="checkbox"/>	█	7. Adequate handwashing facilities supplied & accessible		█	
TIME AND TEMPERATURE RELATIONSHIPS					
<input checked="" type="checkbox"/>		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			
PROTECTION FROM CONTAMINATION					
<input checked="" type="checkbox"/>		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			
FOOD FROM APPROVED SOURCES					
<input checked="" type="checkbox"/>	█	16. Food obtained from approved source			
CORONAVIRUS GUIDANCE IMPLEMENTATION					
<input checked="" type="checkbox"/>	█	17. Takeout, Curbside Pickup, or Delivery Only			
<input checked="" type="checkbox"/>		18. Social Distancing Implemented			
<input checked="" type="checkbox"/>		19. Face Covering Used		█	
Highly Susceptible Populations					
<input checked="" type="checkbox"/>		20. Licensed health care facilities/ public & private schools; prohibited foods not offered			
WATER/HOT WATER					
<input checked="" type="checkbox"/>	█	21. Hot and cold water available			
LIQUID WASTE DISPOSAL					
<input checked="" type="checkbox"/>	█	22. Sewage and wastewater properly disposed			
VERMIN					
<input checked="" type="checkbox"/>	█	23. No rodents, insects, birds, or animals			

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

Received by (Print) <u>Jarred Martinez</u>	Title _____
Email: <u>speedbirdgas@gmail.com</u>	
Specialist (Print) <u>Eric Caubo</u>	Specialist (Signature) <u>[Signature]</u>
	Re-inspection Date: <u>next routine</u>