



County of Sacramento

Retail Food Facility

Official Inspection Report

Date: 02/05/2016
 Time In: 2:15 pm
 Time Out: 2:45 pm
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Facility Name: VALLEY OAKS FOOD & FUEL Permit Holder: BALVIR KAUR
 Address: 14161 RIVER RD City: Walnut Grove Zip Code: 95690 Phone (916)776-1611

CT 99.00	FA FA0030893	PR PR0011656	PE 1612	Type of Inspection: Routine
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Items listed on this report as violations do not meet the requirements set forth in the California Health and Safety Code commencing with section 7; 113700. All violations must be corrected within specified timeframe. *Violations that are classified as "Major" pose an immediate threat to public health and have the potential to cause foodborne illness. All major violations must be corrected immediately. Non-compliance may warrant immediate closure of the food facility.*

OVERALL INSPECTION COMMENTS

OBSERVATIONS

Name on Food Safety Certificate n/a Expiration Date _____

Warewash Chlorine (Cl) _____ ppm Quaternary Ammonia (QA) _____ ppm Heat _____ ° F Iodine _____ ppm
 Water/Hot Water Ware Sink Temp _____ ° F Hand Sink Temp _____ ° F Wiping Cloth _____ ppm Cl

FOOD ITEM / LOCATION / TEMP ° F DOCUMENTATION


ambient temp. / walk in cooler / 41.00 °F

NOTES

No violations observed during today's routine inspection.

STATUS
<input checked="" type="checkbox"/> GREEN - Pass
<input type="checkbox"/> YELLOW - Conditional Pass; Reinspection required
<input type="checkbox"/> RED- Closed; Suspension of permit to operate
<input type="checkbox"/> Placard program not applicable at this time
ACTIONS
<input type="checkbox"/> Photographic documentation obtained
<input type="checkbox"/> Compliance conference required
<input type="checkbox"/> Food / equipment impounded (50)
<input type="checkbox"/> Food safety education required; # of employees _____
<input type="checkbox"/> Permit Suspension; facility closure required (51)

The person in charge is responsible for ensuring that the above mentioned facility is in compliance with all applicable sections of the California Health and Safety Code. If a reinspection is required, fees may be assessed as authorized by current Sacramento County Code, Chapter 6.99.150.

Accepted by: 
 Name and Title: Sunny Singh / Owner
 Specialist: J. Choi Phone: (916)875-8446
 Co-Inspector: _____