



EMD016020+DAPCGNBJ0+08-22-2022



County of Sacramento

Retail Food Facility

Official Inspection Report

Date:	08/22/2022
Page:	1 of 2

ESTABLISHMENT NAME: PITA R US Permit Holder: SAHITHI GANNU

Address: 2690 E Bidwell St Ste 300 City Folsom Zip Code 95630 Phone (916) 817-1184

FA FA0019218	PR PR0048109	Type of Inspection REINSPECTION
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Program Identifier

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.

1b.FOOD SAFETY CERTIFICATION

Observations: No food safety certificate available. Sign up for class within 7 days.

Code Description: Food facilities that prepare, handle, or serve non-prepackaged potentially hazardous food, shall have an employee who has passed an approved food safety certification examination. (113947.1, 113947.3)

1c.FOOD HANDLER CARDS

Observations: No food handler cards available. Provide within 7 days.

Code Description: Food handlers that prepare, handle, or serve non-prepackaged, potentially hazardous food, shall obtain a valid Food Handler Card within 30 days after date of hire. (113948)



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OBSERVATIONS

Name on Food Safety Certificate _____ Expiration Date _____

Warewash Chlorine (Cl) _____ ppm Quaternary Ammonia (QA) _____ ppm Heat _____ °F DDBSA _____ ppm

Water/Hot Water Ware Sink Temp _____ °F Hand Sink Temp _____ °F Wiping Cloth _____ ppm

FOOD ITEM / LOCATION / TEMP °F DOCUMENTATION

walk in / / 38.000000F

NOTES

Previous major violation from 8/17 has been corrected.

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

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: emailed report to sahithi / Manager

Specialist: C. Dorrough Phone: (916) 214-6627

Co-Inspector: _____