







County of Sacramento - Environmental Management Department  
11080 White Rock Road - Suite 200 - Rancho Cordova, CA 95670 - Telephone: 916/875-8440 - Fax: 916/875-8513  
<http://emd.saccounty.gov/EH>







Date:	02/15/2024
Page:	4 of 5

ESTABLISHMENT NAME: MR PERRY'S COFFEE SHOP

Permit Holder: ELEGANT FOOD INC

Address: 7820 Alta Valley Dr City Sacramento Zip Code 95823 Phone (916) 423-2140

FA FA0001412	PR PR152907	Type of Inspection REINSPECTION
-----------------	----------------	------------------------------------

---

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.

**Code Description:** Food facilities shall be fully enclosed in a building consisting of permanent floors, walls, and an overhead structure that meets minimum standards. The walls and ceiling shall be smooth, durable, nonabsorbent, and easily cleanable. Flooring and base coving shall be smooth, durable, and made of approved nonabsorbent material that is easily cleanable. Floor surfaces shall be coved at the juncture of the floor and wall with a 3/8 inch minimum radius and shall extend up the wall at least 4 inches. (114143 (d), 114266, 114268, 114271, 114272)





# County of Sacramento

## Retail Food Facility Official Inspection Report

Date:	02/15/2024
Page:	5 of 5

ESTABLISHMENT NAME: MR PERRY'S COFFEE SHOP Permit Holder: ELEGANT FOOD INC

Address: 7820 Alta Valley Dr City Sacramento Zip Code 95823 Phone (916) 423-2140

FA FA0001412 Program Identifier	PR PR152907	Type of Inspection REINSPECTION
---------------------------------------	----------------	------------------------------------

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.

### 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

### NOTES

Reinspected with reinspection fee was conducted on operator's request. Reinspection was conducted with Dale. During reinspection, observed active vermin activity. Facility is hereby closed by EMD. NO food preparation allowed until reinspected and reopened by this department.

<b>STATUS</b>
<input type="checkbox"/> GREEN - Pass
<input type="checkbox"/> YELLOW - Conditional Pass; Reinspection required
<input checked="" type="checkbox"/> RED- Closed; Suspension of permit to operate
<input type="checkbox"/> Placard program not applicable at this time
<b>ACTIONS</b>
<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 checked="" 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: sent via email to Dale / owner

Specialist: K. Li Phone: (916) 531-4056

Co-Inspector: \_\_\_\_\_