





# County of Sacramento

## Retail Food Facility

### Official Inspection Report

Date:	03/14/2024
Page:	2 of 2

ESTABLISHMENT NAME: CARL'S JR #624 Permit Holder: WOMAR INC

Address: 1065 C St City Galt Zip Code 95632 Phone (209) 745-6843

FA FA0002076 Program Identifier	PR PR0003834	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 NOT OBSERVED Expiration Date \_\_\_\_\_

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

Water/Hot Water Ware Sink Temp 122 °F Hand Sink Temp 102 °F Wiping Cloth \_\_\_\_\_ ppm

#### FOOD ITEM / LOCATION / TEMP °F DOCUMENTATION

#### NOTES

VIOLATION NUMBER 22 HAS BEEN CORRECTED.

FACILITY CALLED A PLUMBER AND WAS ABLE TO CLEAR THE CLOG. PLEASE MAINTAIN. GREASE TRAP WAS LAST PUMPED ON 1/3/24. SAID TO BE DONE EVERY 3 MONTHS. CALL FOR SERVICE AND MAINTAIN.

FACILITY EARNS A GREEN PLACARD AT TIME OF RE-INSPECTION.

FULL ROUTINE INSPECTION NOT COMPLETED DUE TO VIOLATION NUMBER 22. FACILITY WILL BE RE-INSPECTED.

#### Reinspection and Reinstatement of Permit

The facility has been reinspected and the violations for which the Environmental Health Permit to Operate was suspended have been corrected. The permit is hereby reinstated and the closure order is rescinded.

<b>STATUS</b>
<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
<b>ACTIONS</b>
<input checked="" 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 TO FACILITY / MARIA, PERSON IN CHARGE

Specialist: E. Uriarte Phone: (916) 531-2762

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