





County of Sacramento

Retail Food Facility Official Inspection Report

Date:	03/21/2024
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ESTABLISHMENT NAME: SERRITELLA'S Permit Holder: SERRITELLA'S INC

Address: 6241 Fair Oaks Blvd Ste D City Carmichael Zip Code 95608 Phone (916) 482-6483

FA FA0054675 Program Identifier	PR PR0120315	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

Reinspection conducted due to closure of facility on 3-19-24 & 3-20-24 for cockroach infestation. Facility was serviced by professional pest control and will be serviced again. Per owner, facility is scheduled for monthly pest control service. No live cockroaches were observed at time of reinspection. Found three dying roaches beneath reach-in cooler at front prep area and around 10 dead roaches in several areas. (Areas shown to operator.) Monitoring glue boards were placed in multiple areas. Continue with aggressive pest control treatment and monitor all areas for signs of activity. Increase frequency of visits if necessary. Maintain daily cleaning and sanitation of facility to prevent vermin harborage. EMD health permit is reinstated and facility is approved to reopen.

* Reinspection will be conducted within 21 days to verify compliance. Reinspection fee of \$268 will apply for each reinspection.

- Ensure all minor violations from routine inspection 3-19-24 are corrected. See report for details.

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 The permit is hereby reinstated and the closure order is rescinded.

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: send via email to Bonnie Prophet / owner

Specialist: E. Drobenyuk Phone: (916) 599-7050

Co-Inspector: _____