



County of Sacramento

Retail Food Facility

Official Inspection Report

Date:	04/10/2024
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ESTABLISHMENT NAME: NORTHRIDGE LITTLE LEAGUE Permit Holder: NORTHRIDGE LITTLE LEAGUE

Address: 6950 Brayton Ave # Brooktree Park City Citrus Heights Zip Code 95621 Phone (916) 225-8712

FA FA0002029 Program Identifier	PR PR0006619	Type of Inspection INSPECTION
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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.

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 122 °F Hand Sink Temp 122 °F Wiping Cloth _____ ppm

FOOD ITEM / LOCATION / TEMP °F DOCUMENTATION

sliced tomatoes / prep refrigerator / 38F

NOTES

NOTE: Cooling of nacho cheese and chili was discussed during inspection.

Snack bar has a BBQ grill that is cautioned off. Fixings for hamburgers are placed in paper boat tray and given to customer for assembly. The only self-service items are pump type condiments.

STATUS
<input type="checkbox"/> GREEN - Pass
<input type="checkbox"/> YELLOW - Conditional Pass; Reinspection required
<input type="checkbox"/> RED- Closed; Suspension of permit to operate
<input checked="" 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: Sent via email to Christina Bonini / Concession Coordinator

Specialist: J. Martin Phone: (916) 591-1611

Co-Inspector: _____