

Tillamook Co. Environmental Health PO Box 489 Tillamook, OR 97141
(503) 842-3943

Owner Name:

LINDSEY GRIFFIN

LINDSEY'S LATTES - MOBILE

1920 MAIN AVE N

TILLAMOOK, OR 97141

Inspection Type: SEMI

Inspection Result: COMPLD

Establishment #: 2990024 Area: 02

Units: 0

County: 29

LINDSEY'S LATTES - MOBILE

19090 BLANCHARD RD

CLOVERDALE, OR 97112

Phone: (503) 842-3737 x

Inspector: Jaime Craig

Start Date/Time: 1/23/2017 at 12:13:54 PM

AN EVALUATION OF SANITATION ON YOUR MOBILE UNIT HAS THIS DAY BEEN MADE AND YOU ARE HEREBY NOTIFIED OF THE VIOLATIONS FOUND UNDER ORS 624, OAR 333-162 AND OAR 333-150. SUCH VIOLATIONS MAY RESULT IN DENIAL, SUSPENSION, OR REVOCATION OF YOUR LICENSE; OR CLOSURE OF THE UNIT MAY RESULT FROM UNCORRECTED VIOLATIONS. YOU MAY OBTAIN A CONTESTED CASE HEARING FOR ANY DENIAL, SUSPENSION, REVOCATION OR CLOSURE BY CONTACTING THE LICENSING AGENCY. SUCH HEARINGS ARE IN ACCORDANCE WITH ORS CHAPTER 183.

PERSON IN CHARGE EASILY FOUND (AUBREY)
COLD HOLDING: ESPRESSO FRIDGE: MILK 41F
TALL WHITE FRIDGE: CREAM CHEESE 41F
FREEZER FROZEN X 2
NO HOT HOLD AT THIS TIME
GOOD HANDWASHING OBSERVED
LIGHTS SHIELDED
CHEMICALS STORED AND LABELED CORRECTLY
MICROWAVE CLEAN
GOOD DATE MARKING
UNIT CLEAN AND ORGANIZED.

4-501.114(A)

VIOLATION OF SECTION 4-501.114(A) *PRIORITY* The chlorine sanitizer concentration, pH, or temperature is not adequate, specifically:

3 COMPARTMENT SINK AT 0PPM, BLEACH BUCKET AT 10PPM. BOTH SHOULD BE CHANGED ON A REGUAL BASIS EVERY COUPLE OF HRS.

REQUIRED CORRECTION: CORRECT IMMEDIATELY. Provide and maintain an approved chlorine chemical sanitizer solution that has a minimum concentration of 50 ppm at 75°F for water with a pH of 8 or less, or 100°F for water with a pH of 10 or less, or as allowed

CORRECTED TO 50PPM FOR BOTH. ONE TEASPOON OF BLEACH TO ONE GALLON OF WATER. NEED TO PURCHASE MORE TEST STRIPS ASAP

3-304.12

VIOLATION OF SECTION 3-304.12 In-use dispensing utensils are not properly stored, specifically:

ICE SCOOP BURIED IN ICE

REQUIRED CORRECTION: In-use food preparation or dispensing utensils shall be stored: 1) in the food with the handles above the top of the food; 2) on a clean portion of the food preparation table or cooking equipment if they are cleaned and sanitized as r

PLEASE SEE ABOVE RULE. CORRECTED.

Establishment: 2990024

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Inspection Type: SEMI

Start Date/Time: 1/23/2017 at 12:13:54

3-305.11

VIOLATION OF SECTION 3-305.11 Food is not stored to prevent contamination, specifically:

CONTAINER OF SUGAR OPEN NEXT TO HAND SINK. SAME AS LAST INSPECTION.

REQUIRED CORRECTION: Food shall be protected from contamination by being stored: 1) In a clean, dry location; 2) Where it is not exposed to splash, dust or other contamination; and 3) At least 6 inches above the floor.

**SUGAR CONTAINER MOVED TO SHELF WTH SYRUP ON IT. PLEASE FIND
ALTERATIVE SPOT SO HAND WASH WATER DOES NOT DRIP IN INTO CONTAINER.
CORRECTED**

**THANK YOU FOR HAVING FOOD HANDLERS ALL ON DISPLAY.

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Person In Charge

Inspection By: Jaime Craig

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Historical 9/12/2016 MOBILE UNIT SERVICE INSPECTION REPORT

**Tillamook Co. Environmental Health PO Box 489 Tillamook, OR 97141
(503) 842-3943**

Owner Name:

LINDSEY GRIFFIN

LINDSEY'S LATTES - MOBILE

1920 MAIN AVE N

TILLAMOOK, OR 97141

Inspection Type: SEMI

Inspection Result: COMPLD

Establishment #: 2990024 Area: 02

Units: 0

County: 29

LINDSEY'S LATTES - MOBILE

19090 BLANCHARD RD

CLOVERDALE, OR 97112

Phone: (503) 842-3737 x

Inspector: Jaime Craig

Start Date/Time: 9/12/2016 at 4:03:45 PM

AN EVALUATION OF SANITATION ON YOUR MOBILE UNIT HAS THIS DAY BEEN MADE AND YOU ARE HEREBY NOTIFIED OF THE VIOLATIONS FOUND UNDER ORS 624, OAR 333-162 AND OAR 333-150. SUCH VIOLATIONS MAY RESULT IN DENIAL, SUSPENSION, OR REVOCATION OF YOUR LICENSE; OR CLOSURE OF THE UNIT MAY RESULT FROM UNCORRECTED VIOLATIONS. YOU MAY OBTAIN A CONTESTED CASE HEARING FOR ANY DENIAL, SUSPENSION, REVOCATION OR CLOSURE BY CONTACTING THE LICENSING AGENCY. SUCH HEARINGS ARE IN ACCORDANCE WITH ORS CHAPTER 183.

MILK FRIDGE
MILK AT 40F
TALL SILVER FRIDGE- BURRITO AT 39F
FREEZER ALL OKAY
RESTROOM IN WAREHOUSE
SANITIZER AT 10 PPM - REMADE TO 50 PPM
CHEMICALS LABELLED AND STORED SEPARATE

ALL EMPLOYEE FOOD HANDLER CARDS SHOULD BE ON SITE AVAILABLE FOR INSPECTOR

3-305.11

VIOLATION OF SECTION 3-305.11 Food is not stored to prevent contamination, specifically:

SUGAR IS STORED AT HANDSINK UNGER PAPER TOWELS

REQUIRED CORRECTION: Food shall be protected from contamination by being stored: 1) In a clean, dry location; 2) Where it is not exposed to splash, dust or other contamination; and 3) At least 6 inches above the floor.

MOVE TO DIFFERENT AREA AWAY FROM DRIP

Comments:

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Establishment: 2990024
Inspection Type: REINSP

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Start Date/Time: 1/19/2016 at 10:46:18

Historical 1/19/2016 MOBILE UNIT SERVICE INSPECTION REPORT

Page 4 of 20

**Tillamook Co. Environmental Health PO Box 489 Tillamook, OR 97141
(503) 842-3943**

Owner Name:
LINDSEY GRIFFIN
LINDSEY'S LATTES - MOBILE
1920 MAIN AVE N
TILLAMOOK, OR 97141

Inspection Type: REINSP
Inspection Result: COMPLD
Establishment #: 2990024 Area: 02
Units: 0
County: 29

LINDSEY'S LATTES - MOBILE
19090 BLANCHARD RD
CLOVERDALE, OR 97112

Phone: (503) 842-3737 x
Inspector: Mason Lyman

Start Date/Time: 1/19/2016 at 10:46:18 AM

AN EVALUATION OF SANITATION ON YOUR MOBILE UNIT HAS THIS DAY BEEN MADE AND YOU ARE HEREBY NOTIFIED OF THE VIOLATIONS FOUND UNDER ORS 624, OAR 333-162 AND OAR 333-150. SUCH VIOLATIONS MAY RESULT IN DENIAL, SUSPENSION, OR REVOCATION OF YOUR LICENSE; OR CLOSURE OF THE UNIT MAY RESULT FROM UNCORRECTED VIOLATIONS. YOU MAY OBTAIN A CONTESTED CASE HEARING FOR ANY DENIAL, SUSPENSION, REVOCATION OR CLOSURE BY CONTACTING THE LICENSING AGENCY. SUCH HEARINGS ARE IN ACCORDANCE WITH ORS CHAPTER 183.

REINSPECTION OF FACILITY-

DATING- ALL FOOD DATED CORRECTLY. I CORRECTED SOME MISCOMMUNICATION ABOUT CERTAIN ITEMS. PLEASE KEEP POTENTIALLY HAZARDOUS FOODS FOR UP TO 7 DAYS (COMPANY POLICY FOR FEWER DAYS). COUNT THE DAY YOU MADE IT/OPENED IT. TALKED TO PIC ABOUT SELL BY/USE BY DATES. USE FOR 7 DAYS AFTER OPENED, UP TO THE USE BY DATE, OR WHICHEVER IS LESS.

HANDWASHING LOCATIONS- EMPLOYEES SAY NOW THAT THEY ONLY FEEL COMFORTABLE WASHING HANDS AT THE HAND SINKS. PLEASE DO NOT WASH HANDS AT THE 3 COMPT SINK. THANKS.

PAPER TOWELS- STOCKED AT HAND SINK, AND EXTRAS ARE AVAILABLE ON SITE. GREAT. BLEACH IS AT THE PROPER CONCENTRATION AND TEMPERATURE.

99E

PRIORITY OR PRIORITY FOUNDATION ITEMS CORRECTED
All priority and priority foundation violations have been corrected.

Comments:

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Person In Charge

Inspection By: Mason Lyman

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Historical 1/4/2016 MOBILE UNIT SERVICE INSPECTION REPORT

**Tillamook Co. Environmental Health PO Box 489 Tillamook, OR 97141
(503) 842-3943**

Owner Name:

LINDSEY GRIFFIN

LINDSEY'S LATTES - MOBILE

1920 MAIN AVE N

TILLAMOOK, OR 97141

Inspection Type: SEMI

Inspection Result: CONTIN

Establishment #: 2990024 Area: 02

Units: 0

County: 29

LINDSEY'S LATTES - MOBILE

19090 BLANCHARD RD

CLOVERDALE, OR 97112

Phone: (503) 842-3737 x

Inspector: Mason Lyman

Start Date/Time: 1/4/2016 at 11:18:49 AM

AN EVALUATION OF SANITATION ON YOUR MOBILE UNIT HAS THIS DAY BEEN MADE AND YOU ARE HEREBY NOTIFIED OF THE VIOLATIONS FOUND UNDER ORS 624, OAR 333-162 AND OAR 333-150. SUCH VIOLATIONS MAY RESULT IN DENIAL, SUSPENSION, OR REVOCATION OF YOUR LICENSE; OR CLOSURE OF THE UNIT MAY RESULT FROM UNCORRECTED VIOLATIONS. YOU MAY OBTAIN A CONTESTED CASE HEARING FOR ANY DENIAL, SUSPENSION, REVOCATION OR CLOSURE BY CONTACTING THE LICENSING AGENCY. SUCH HEARINGS ARE IN ACCORDANCE WITH ORS CHAPTER 183.

INSPECTION OF FACILITY-

COLD HOLDING-

TALL FRIDGE- BURRITOS 41F, MIL FRIDGE- 41F.

- HAND SINKS WITH SOAP AND HOT WATER
- SHELVING SMOOTH/EASILY CLEANABLE
- PROBE THERMOMETERS PRESENT
- TOXICS LABELED/ STORED WELL
- PROPER COOLING TECHNIQUES/SHALLOW PANS WITH NO LIDS
- FREEZERS FROZEN
- TEST STRIPS PRESENT
- MICROWAVES/OVENS CLEAN
- HANDWASHING OCCURING AT PROPER INTERVALS
- BAKED GOODS COVERED
- LIGHTS SHIELDED
- ICE MACHINE CLEAN
- SCOOPS UP/HANDLES OUT
- 3 COMPT SINK- 50 PPM BLEACH
- 50 PPM BLEACH SANITIZING BUCKETS
- FOOD FROM APPROVED SOURCES

2-301.15

VIOLATION OF SECTION 2-301.15 *PRIORITY FOUNDATION* Food employees are not washing their hands in an approved handwashing sink, specifically:

EMPLOYEE SEEN WASHING HANDS AT 3 COMPT SINK, INSTEAD OF HAND SINK.

REQUIRED CORRECTION: CORRECT IMMEDIATELY. Food employees shall clean their hands in a handwashing sink or approved automatic handwashing facility and may not clean their hands in a sink used for food preparation, or in a service sink or a curbed cleaning

TALKED TO PIC ABOUT ONLY WASHING HANDS AT HAND SINK.

WILL REINSPECT.

3-501.17

VIOLATION OF SECTION 3-501.17 *PRIORITY FOUNDATION* Ready-to-eat food is not properly date-marked, specifically:

GOOD DATEMARKING INCLUDED ON BURRITOS, NO DATEMARKS ON LUNCH MEAT ITEMS IN FRIDGE.

REQUIRED CORRECTION: CORRECT IMMEDIATELY. Refrigerated, ready-to-eat potentially hazardous food prepared in the food establishment and held for more than 24 hours must be marked with the date of preparation or consumption. Including the date of preparat

CORRECTED- MARKED CORRECTLY ITEMS THAT NEEDED DATING. TALKED TO PIC ABOUT DATING OPEN ITEMS UNDER REFRIGERATION, TIME PAUSES IN FREEZER. OUT FOR 7 DAYS OR LESS. PLEASE DOCUMENT.

WILL REINSPECT.

6-301.12

VIOLATION OF SECTION 6-301.12 *PRIORITY FOUNDATION* Hand towels or a hand drying device is not provided at the handwashing sink, specifically:

ONLY HAND SINK IS EMPTY AT BEGINNING OF INSPECTION.

REQUIRED CORRECTION: CORRECT IMMEDIATELY. Each handwashing sink or group of adjacent handwashing sinks shall be provided with a supply of individual disposable towels, a continuous towel system that supplies the user with a clean towel, or a heated-air ha

CORRECTED- RESTOCKED PAPER TOWELS. PLEASE KEEP TOWELS STOCKED DURING OPERATION.

**HAVE UP TO DATE FOOD HANDLER CARD BOARD READY FOR FUTURE INSPECTIONS.

**TALKED TO PIC ABOUT 3 COMPT SINK TECHNIQUES WITH BLEACH STEP FOR 10 SECONDS, AND ALLOWING ITEMS TO ONLY AIR DRY.

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Historical 7/7/2015 MOBILE UNIT SERVICE INSPECTION REPORT

**Tillamook Co. Environmental Health PO Box 489 Tillamook, OR 97141
(503) 842-3943**

Owner Name:

LINDSEY GRIFFIN

LINDSEY'S LATTES - MOBILE

1920 MAIN AVE N

TILLAMOOK, OR 97141

Inspection Type: SEMI

Inspection Result: COMPLD

Establishment #: 2990024 Area: 02

Units: 0

County: 29

LINDSEY'S LATTES - MOBILE

19090 BLANCHARD RD

CLOVERDALE, OR 97112

Phone: (503) 842-3737 x

Inspector: Mason Lyman

Start Date/Time: 7/7/2015 at 11:16:44 AM

AN EVALUATION OF SANITATION ON YOUR MOBILE UNIT HAS THIS DAY BEEN MADE AND YOU ARE HEREBY NOTIFIED OF THE VIOLATIONS FOUND UNDER ORS 624, OAR 333-162 AND OAR 333-150. SUCH VIOLATIONS MAY RESULT IN DENIAL, SUSPENSION, OR REVOCATION OF YOUR LICENSE; OR CLOSURE OF THE UNIT MAY RESULT FROM UNCORRECTED VIOLATIONS. YOU MAY OBTAIN A CONTESTED CASE HEARING FOR ANY DENIAL, SUSPENSION, REVOCATION OR CLOSURE BY CONTACTING THE LICENSING AGENCY. SUCH HEARINGS ARE IN ACCORDANCE WITH ORS CHAPTER 183.

COLD HOLDING-

TALL FRIDGE- MILK 40F, MILK FRIDGE- MILK 37F.

NO HOT HOLDING-

COOLING - EGG FILLING FOR BURRITOS- 110F AFTER 10 MINUTES.- GOOD COOLING TECHNIQUES.

HAND SINKS OK/ WELL STOCKED

TEST STRIPS PROVIDED

LIGHTS PROTECTED

LONG HAIR BOUND UP

TALKED TO PIC ABOUT FINGERNAIL RULES

DATEMARKING SYSTEM GOOD

GARBAGE COLLECTION SAFE/TIGHT LIDS

FREEZERS FROZEN

SHELVING SMOOTH/EASILY CLEANABLE

FRIDGES WITH THERMOMETERS

MICROWAVES/OVENS CLEAN

GOOD EMPLOYEE HANDWASHING (DONE ONLY AT HAND WASH SINK).

OUTER OPENINGS PROTECTED

TOXICS LABELED/STORED WELL

BAKED GOODS COVERED

RESTROOM AVAILABLE FOR EMPLOYEES ONLY, AT CO-OP.

3 COMPT SINK- 50 PPM BLEACH

50 PPM BLEACH SANITIZER BUCKET

NO CONSUMER ADVISORY NEEDED

FOOD FROM APPROVED SOURCES

REVIEWED COMMON ALLERGENS WITH STAFF

**DEFROST CYCLE NEEDED FOR FREEZER.

NO VIOLATIONS- THANK YOU

Establishment: 2990024
Inspection Type: SEMI

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Start Date/Time: 7/7/2015 at 11:16:44

Comments:

Site Report Generated: 6/23/2017 3:44:34 PM

Person In Charge

Inspection By: Mason Lyman

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Historical 2/19/2015 MOBILE UNIT SERVICE INSPECTION REPORT

**Tillamook Co. Environmental Health PO Box 489 Tillamook, OR 97141
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1920 MAIN AVE N

TILLAMOOK, OR 97141

Inspection Type: REINSP

Inspection Result: COMPLD

Establishment #: 2990024 Area: 02

Units: 0

County: 29

LINDSEY'S LATTES - MOBILE

19090 BLANCHARD RD

CLOVERDALE, OR 97112

Phone: (503) 842-3737 x

Inspector: Mason Lyman

Start Date/Time: 2/19/2015 at 12:34:03 PM

AN EVALUATION OF SANITATION ON YOUR MOBILE UNIT HAS THIS DAY BEEN MADE AND YOU ARE HEREBY NOTIFIED OF THE VIOLATIONS FOUND UNDER ORS 624, OAR 333-162 AND OAR 333-150. SUCH VIOLATIONS MAY RESULT IN DENIAL, SUSPENSION, OR REVOCATION OF YOUR LICENSE; OR CLOSURE OF THE UNIT MAY RESULT FROM UNCORRECTED VIOLATIONS. YOU MAY OBTAIN A CONTESTED CASE HEARING FOR ANY DENIAL, SUSPENSION, REVOCATION OR CLOSURE BY CONTACTING THE LICENSING AGENCY. SUCH HEARINGS ARE IN ACCORDANCE WITH ORS CHAPTER 183.

REINSPECTION BASED UPON BASED PRIORITY VIOLATIONS -

HAND SINK WAS OPEN AND AVAILABLE IN THE FACILITY. ONLY HANDS WERE BEING WASHED THERE. NO DISH WASHING ALLOWED IN HAND SINK.

HAND WASHING- EMPLOYEE WAS WASHING HANDS AT THE APPROPRAITE INTERVAL WHEN SWITCHING BETWEEN TASKS (IN THIS CASE, WHEN SWITCHING BETWEEN TAKING MONEY AND PREPARING FOOD). USE HOT WATER AND SOAP FOR 15-20 SECONDS.

4-501.114(A)

VIOLATION OF SECTION 4-501.114(A) *PRIORITY* The chlorine sanitizer concentration, pH, or temperature is not adequate, specifically:

SANTIIZER BUCKET AT 10 PPM BLEACH. ALSO, 3 COMPT SINK BLEACH READING AT 0 PPM.

REQUIRED CORRECTION: CORRECT IMMEDIATELY. Provide and maintain an approved chlorine chemical sanitizer solution that has a minimum concentration of 50 ppm at 75°F for water with a pH of 8 or less, or 100°F for water with a pH of 10 or less, or as allowed

CORRECTED- ADDED SANITIZER TO PROPER CONCENTRATION OF 50-100 PPM. TALKED TO PIC ABOUT DIFFERENT PROPERTIES OF BLEACH.

Comments:

Site Report Generated: 6/23/2017 3:44:34 PM

Establishment: 2990024
Inspection Type: REINSP

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Historical 2/5/2015 MOBILE UNIT SERVICE INSPECTION REPORT Page 10 of 20

**Tillamook Co. Environmental Health PO Box 489 Tillamook, OR 97141
(503) 842-3943**

Owner Name:
LINDSEY GRIFFIN
LINDSEY'S LATTES - MOBILE
1920 MAIN AVE N
TILLAMOOK, OR 97141

Inspection Type: REINSP
Inspection Result: CONTIN
Establishment #: 2990024 Area: 02
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LINDSEY'S LATTES - MOBILE
19090 BLANCHARD RD
CLOVERDALE, OR 97112

Phone: (503) 842-3737 x
Inspector: Mason Lyman

Start Date/Time: 2/5/2015 at 10:52:13 AM

AN EVALUATION OF SANITATION ON YOUR MOBILE UNIT HAS THIS DAY BEEN MADE AND YOU ARE HEREBY NOTIFIED OF THE VIOLATIONS FOUND UNDER ORS 624, OAR 333-162 AND OAR 333-150. SUCH VIOLATIONS MAY RESULT IN DENIAL, SUSPENSION, OR REVOCATION OF YOUR LICENSE; OR CLOSURE OF THE UNIT MAY RESULT FROM UNCORRECTED VIOLATIONS. YOU MAY OBTAIN A CONTESTED CASE HEARING FOR ANY DENIAL, SUSPENSION, REVOCATION OR CLOSURE BY CONTACTING THE LICENSING AGENCY. SUCH HEARINGS ARE IN ACCORDANCE WITH ORS CHAPTER 183.

REINSPECTION OF FACILITY-

****PLEASE KEEP UNAUTHORIZED PERSONS OUT OF KITCHEN AREA DURUING BUSINESS HOURS.
PLEASE CONTROL LONG HAIR AND KEEP A RESTRAINT AS TO KEEP IT AWAY FROM FOOD DURING FOOD PREPARATION.

RECENTLY RAN DEFROST CYCLE ON FREEZER, LOOK GOOD.

REINSPECTION WITHIN 2 WEEKS.

2-301.14

VIOLATION OF SECTION 2-301.14 *PRIORITY* Food employees are not washing their hands as often as necessary, specifically:

FOOD WORKERS NOT WASHING HANDS BETWEEN TASKS.

REQUIRED CORRECTION: CORRECT IMMEDIATELY. Food employees must thoroughly wash their hands and exposed portions of their arms: 1) before beginning or returning to work; 2) after touching body parts other than clean hands and clean, exposed portions of arm

PLEASE WASH HANDS IN APPROPRIATE HAND SINK WHEN SWITCHING TASKS.

4-501.114(A)

VIOLATION OF SECTION 4-501.114(A) *PRIORITY* The chlorine sanitizer concentration, pH, or temperature is not adequate, specifically:

SANITIZER BUCKET NOT MADE UP FOR THE DAY YET.

REQUIRED CORRECTION: CORRECT IMMEDIATELY. Provide and maintain an approved chlorine chemical sanitizer solution that has a minimum concentration of 50 ppm at 75°F for water with a pH of 8 or less, or 100°F for water with a pH of 10 or less, or as allowed

SANITIZER BUCKET MADE DURING INSPECTION. CONCENTRATION AT 50 PPM BLEACH.

Establishment: 2990024
Inspection Type: REINSP

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Start Date/Time: 2/5/2015 at 10:52:13

5-205.11

VIOLATION OF SECTION 5-205.11 *PRIORITY FOUNDATION* A handwashing sink is not accessible for employee use at all times, is used for purposes other than handwashing or is not operated properly, specifically:

HANDSINK HAD ITEMS IN IT, AND WAS BEING USED FOR PURPOSES OTHER THAN TO WASH HANDS

REQUIRED CORRECTION: CORRECT IMMEDIATELY. Handwashing sinks shall be accessible at all times for employee use and not used for other purposes. An automatic handwashing sink shall be used in accordance with manufacturer's instructions.

HANDS CAN ONLY BE WASHED AT HAND SINKS. THE ONLY ACTIVITY AT HAND SINKS IS TO WASH HANDS. ITEM MOVED, AND WILL ONLY BE USED FOR HANDS IN THE FUTURE.

Comments:

Site Report Generated: 6/23/2017 3:44:34 PM

Person In Charge

Inspection By: Mason Lyman

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Historical 1/26/2015 MOBILE UNIT SERVICE INSPECTION REPORT

**Tillamook Co. Environmental Health PO Box 489 Tillamook, OR 97141
(503) 842-3943**

Owner Name:

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LINDSEY'S LATTES - MOBILE

1920 MAIN AVE N

TILLAMOOK, OR 97141

Inspection Type: SEMI

Inspection Result: CONTIN

Establishment #: 2990024 Area: 02

Units: 0

County: 29

LINDSEY'S LATTES - MOBILE

19090 BLANCHARD RD

CLOVERDALE, OR 97112

Phone: (503) 842-3737 x

Inspector: Mason Lyman

Start Date/Time: 1/26/2015 at 3:58:23 PM

AN EVALUATION OF SANITATION ON YOUR MOBILE UNIT HAS THIS DAY BEEN MADE AND YOU ARE HEREBY NOTIFIED OF THE VIOLATIONS FOUND UNDER ORS 624, OAR 333-162 AND OAR 333-150. SUCH VIOLATIONS MAY RESULT IN DENIAL, SUSPENSION, OR REVOCATION OF YOUR LICENSE; OR CLOSURE OF THE UNIT MAY RESULT FROM UNCORRECTED VIOLATIONS. YOU MAY OBTAIN A CONTESTED CASE HEARING FOR ANY DENIAL, SUSPENSION, REVOCATION OR CLOSURE BY CONTACTING THE LICENSING AGENCY. SUCH HEARINGS ARE IN ACCORDANCE WITH ORS CHAPTER 183.

COLD HOLDING-
TALL FRIDGE AMBIENT 40F.
MILK FRIDGE- MILK 40F.

FREEZERS FROZEN
HAND SINKS STOCKED WITH SUPPLIES
LIGHTS PROTECTED
SHELVING SMOOTH/EASILY CLEANABLE
DRY SORAGE UP/COVERED
EMPLOYEE DRINKS WITH LIDS AND STRAWS- GOOD
LICE MACHINE CLEAN
FIRE EXTINGUISHERS PRESENT
3 COMPT SINK- 100 PPM BLEACH
TOXICS ARE LABELED AND STORED CORRECTLY
GOOD ORGANIZATION AND SURFACES ARE CLEAR
FOOD FROM APPROVED SOURCES
GOOD CLEANING SCHEDULE FOR EVERYDAY
MCIROWAVES/OVENS CLEAN
REVIEWED ALLERGENS AND ILLNESS POLICY

**CONSIDER USING DEFROST CYCLE ON FREEZERS TO AVOID BUILD UP OF ICE ON INSIDE OF MACHINE.
**CURRENTLY MAKING BURRITOS, KEEP IN FRIDGE UNTIL WORKING DIRECTLY WITH THEM, THEN WORK QUICKLY TO KEEP FOOD ITEMS AS CLOSE TO 41F AS POSSIBLE WHEN WORKING ON COUNTERTOPS.

2-301.14

VIOLATION OF SECTION 2-301.14 *PRIORITY* Food employees are not washing their hands as often as necessary, specifically:

EMPLOYEE DID NOT WASH HANDS BETWEEN SWITCHING TASKS OF HANDLING MONEY AND FOOD PREPARATION EFFECTIVELY.

REQUIRED CORRECTION: CORRECT IMMEDIATELY. Food employees must thoroughly wash their hands and exposed portions of their arms: 1) before beginning or returning to work; 2) after touching body parts other than clean hands and clean, exposed portions of arm

TALKED TO EMPLOYEE ABOUT SAFE HAND WASHING PRACTICES AND ENCOURAGED THEM TO USE HAND SINK AT APPROPRIATE TIMES AND WITH EFFECTIVE TOOLS.

4-501.114(A)

VIOLATION OF SECTION 4-501.114(A) *PRIORITY* The chlorine sanitizer concentration, pH, or temperature is not adequate, specifically:

NO SANITIZER BUCKET OUT DURING INSPECTION. FACILITY USED A SPRAY CLEANER FOR CLEANING SURFACES.

REQUIRED CORRECTION: CORRECT IMMEDIATELY. Provide and maintain an approved chlorine chemical sanitizer solution that has a minimum concentration of 50 ppm at 75°F for water with a pH of 8 or less, or 100°F for water with a pH of 10 or less, or as allowed

ALTERNATIVE IN PLACE- MADE BOWL OF WATER WITH BLEACH AT 50-100 PPM AND PUT RAG IN IT TO USE TO DISINFECT SURFACES.

5-205.11

VIOLATION OF SECTION 5-205.11 *PRIORITY FOUNDATION* A handwashing sink is not accessible for employee use at all times, is used for purposes other than handwashing or is not operated properly, specifically:

HAND SINK BLOCKED WITH GALLON JUG OF MILK AT BEGINNING OF INSPECTION.

REQUIRED CORRECTION: CORRECT IMMEDIATELY. Handwashing sinks shall be accessible at all times for employee use and not used for other purposes. An automatic handwashing sink shall be used in accordance with manufacturer's instructions.

CORRECTED- REMOVED JUG OF MILK FROM SINK TO ALLOW HANDS TO BE FREE TO USE HAND SINK AT ALL TIMES.

Comments:

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Person In Charge

Inspection By: Mason Lyman

Historical 9/11/2014 MOBILE UNIT SERVICE INSPECTION REPORT

**Tillamook Co. Environmental Health PO Box 489 Tillamook, OR 97141
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1920 MAIN AVE N

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County: 29

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19090 BLANCHARD RD

CLOVERDALE, OR 97112

Phone: (503) 842-3737 x

Inspector: Mason Lyman

Start Date/Time: 9/11/2014 at 3:52:48 PM

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HANDSINKS WITH HOT WATER AND PAPER TOWELS
MICROWAVES ARE CLEAN
ICE MACHINE CLEAN
3 COMPT SINK USED- 100 PPM SANITIZING CHLORINE WATER USED
FREEZERS ALL FROZEN
BULK CONTAINERS LABELED
SURFACES/WALLS/FLOORS CLEAN- GOOD OVERALL CLEANLINESS
OUTSIDE OF BLDG CLEAN- FREE OF PESTS INSIDE
GARBAGE COLLECTION SAFE/CLEAN/COVERED

COLD HOLDING-

SMALL PREP FRIDGE- MILK 40F

TALL FRIDGE CUT TOMATOES- 40F, HAM 40F

****PROVIDE DATEMARK FOR LUNCH MEATS AND OTHER READY-TO-EAT FOOD THAT IS POTENTIALLY HAZARDOUS AT THE END OF EACH DAY.**

****RESTRICT JEWELRY USAGE TO PREVENT BUILDUP OF CONTAMINANTS ON HANDS.**

100 PPM IN SANITIZING BUCKETS, USE FOR CLEANING SURFACES EVERYNIGHT INSTEAD OF 409 SPRAYING OF SURFACES.

6-301.11

VIOLATION OF SECTION 6-301.11 *PRIORITY FOUNDATION* Soap is not provided at a handwashing sink, specifically:

NO SOAP AT HAND WASH SINK

REQUIRED CORRECTION: CORRECT IMMEDIATELY. Each handwashing sink or group of 2 adjacent handwashing sinks shall be provided with a supply of hand cleaning liquid, powder or bar soap.

CORRECTED- PROVIDED SOAP AT HAND SINK.

3-304.12

VIOLATION OF SECTION 3-304.12 In-use dispensing utensils are not properly stored, specifically:

SCOOP HANDLES BELOW SURFACE OF DRY GOODS

REQUIRED CORRECTION: In-use food preparation or dispensing utensils shall be stored: 1) in the food with the handles above the top of the food; 2) on a clean portion of the food preparation table or cooking equipment if they are cleaned and sanitized as r

PLEASE FIX.

6-202.11

VIOLATION OF SECTION 6-202.11 Lights are not properly shielded, specifically:

LIGHTS ARE NOT SHIELDED

REQUIRED CORRECTION: Effective shielding or shatter-resistant bulbs shall be provided for all light fixtures where there is exposed food, clean equipment, utensils and linens, and unwrapped single-service or single-use articles. Infrared or other heat la

PROVIDE SHIELD

Comments:

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Person In Charge

Inspection By: Mason Lyman

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Historical 4/24/2014 MOBILE UNIT SERVICE INSPECTION REPORT

**Tillamook Co. Environmental Health PO Box 489 Tillamook, OR 97141
(503) 842-3943**

Owner Name:

LINDSEY GRIFFIN

LINDSEY'S LATTES - MOBILE

1920 MAIN AVE N

TILLAMOOK, OR 97141

Inspection Type: SEMI

Inspection Result: COMPLD

Establishment #: 2990024 Area: 02

Units: 0

County: 29

LINDSEY'S LATTES - MOBILE

19090 BLANCHARD RD

CLOVERDALE, OR 97112

Phone: (503) 842-3737 x

Inspector: Annette Pampush

Start Date/Time: 4/24/2014 at 10:07:48 AM

AN EVALUATION OF SANITATION ON YOUR MOBILE UNIT HAS THIS DAY BEEN MADE AND YOU ARE HEREBY NOTIFIED OF THE VIOLATIONS FOUND UNDER ORS 624, OAR 333-162 AND OAR 333-150. SUCH VIOLATIONS MAY RESULT IN DENIAL, SUSPENSION, OR REVOCATION OF YOUR LICENSE; OR CLOSURE OF THE UNIT MAY RESULT FROM UNCORRECTED VIOLATIONS. YOU MAY OBTAIN A CONTESTED CASE HEARING FOR ANY DENIAL, SUSPENSION, REVOCATION OR CLOSURE BY CONTACTING THE LICENSING AGENCY. SUCH HEARINGS ARE IN ACCORDANCE WITH ORS CHAPTER 183.

THIOS IS A SEMI ANNUAL INSPECTION

FACILITY COLD HOLDING:

MILK FRIDGE- MILK AT 36F

TALL FRIDGE- AMBIENT AT 36F

FREEZER- ALL OKAY

NO HOT HOLDING

BURRITOS MADE IN ADVANCE AND HEATED TO ORDER

TEMPED AT 160F FOR SERVICE

** SANITIZERS AT 100+ PPM- REDUCED

CHECK WITH TEST STRIPS, USE WARM WATER, REDUCE TO 50 PPM

DATMARKING OK

CHEMICALS SEPARATE

HANDWASH OKAY

3-305.11

VIOLATION OF SECTION 3-305.11 Food is not stored to prevent contamination, specifically:

BAGELS ON COUNTER NEAR BLEACH BUCKET

REQUIRED CORRECTION: Food shall be protected from contamination by being stored: 1) In a clean, dry location; 2) Where it is not exposed to splash, dust or other contamination; and 3) At least 6 inches above the floor.

STORE IN CONTAINER WITH LID OR AWAY FROM SINK.BLEACH

Comments:

Site Report Generated: 6/23/2017 3:44:34 PM

Historical 7/19/2013

MOBILE UNIT SERVICE INSPECTION REPORT

**Tillamook Co. Environmental Health PO Box 489 Tillamook, OR 97141
(503) 842-3943**

Owner Name:

LINDSEY GRIFFIN

LINDSEY'S LATTES - MOBILE

1920 MAIN AVE N

TILLAMOOK, OR 97141

Inspection Type: SEMI

Inspection Result: COMPLD

Establishment #: 2990024 Area: 02

Units: 0

County: 29

LINDSEY'S LATTES - MOBILE

19090 BLANCHARD RD

CLOVERDALE, OR 97112

Phone: (503) 842-3737 x

Inspector: Melissa Kauffman

Start Date/Time: 7/19/2013 at 11:38:09 AM

AN EVALUATION OF SANITATION ON YOUR MOBILE UNIT HAS THIS DAY BEEN MADE AND YOU ARE HEREBY NOTIFIED OF THE VIOLATIONS FOUND UNDER ORS 624, OAR 333-162 AND OAR 333-150. SUCH VIOLATIONS MAY RESULT IN DENIAL, SUSPENSION, OR REVOCATION OF YOUR LICENSE; OR CLOSURE OF THE UNIT MAY RESULT FROM UNCORRECTED VIOLATIONS. YOU MAY OBTAIN A CONTESTED CASE HEARING FOR ANY DENIAL, SUSPENSION, REVOCATION OR CLOSURE BY CONTACTING THE LICENSING AGENCY. SUCH HEARINGS ARE IN ACCORDANCE WITH ORS CHAPTER 183.

THE PURPOSE OF THIS VISIT IS A SEMI ANNUAL INSPECTION

SANITIZER 50PPM BL
FOOD CONTACT SURFACES ARE CLEAN AND SANITIZED
REFRIGERATORS ARE BELOW 41F
COFFEE FRIDGE MILK 40F
HOMESTYLE BURRTIO 40F
FREEZERS ARE FROZEN
NO HOT HOLDING
OUTER OPENINGS ARE PROTECTED
FLOORS ARE CLEAN WITH NO LONG TERM FOOD DEBRIS
FOOD PREPARED ON SITE
THERMOMETERS ARE PROVIDED
MICROWAVE CLEAN

6-301.12

VIOLATION OF SECTION 6-301.12 *PRIORITY FOUNDATION* Hand towels or a hand drying device is not provided at the handwashing sink, specifically:

AT THE START OF INSPECTION THE DESIGNATED HANDWASHING SINK WAS WITHOUT PAPER TOWELS

REQUIRED CORRECTION: CORRECT IMMEDIATELY. Each handwashing sink or group of adjacent handwashing sinks shall be provided with a supply of individual disposable towels, a continuous towel system that supplies the user with a clean towel, or a heated-air ha

PLEASE HAVE PAPER TOWELS AT SINK AT ALL TIMES TO ENCOURAGE HANDWASHING

***PAPER TOWELS WERE REPLACED8 -CORRECTED**

Establishment: 2990024

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Inspection Type: SEMI

Start Date/Time: 7/19/2013 at 11:38:09

990

This facility has # _____ food handlers with # _____ having valid food handler certificates.

Comments:

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Person In Charge

Inspection By: Melissa Kauffman

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Historical 1/2/2013 MOBILE UNIT SERVICE INSPECTION REPORT

**Tillamook Co. Environmental Health PO Box 489 Tillamook, OR 97141
(503) 842-3943**

Owner Name:

LINDSEY GRIFFIN

LINDSEY'S LATTES - MOBILE

1920 MAIN AVE N

TILLAMOOK, OR 97141

Inspection Type: SEMI

Inspection Result: COMPLD

Establishment #: 2990024 Area: 02

Units: 0

County: 29

LINDSEY'S LATTES - MOBILE

19090 BLANCHARD RD

CLOVERDALE, OR 97112

Phone: (503) 842-3737 x

Inspector: Melissa Kauffman

Start Date/Time: 1/2/2013 at 1:55:15 PM

AN EVALUATION OF SANITATION ON YOUR MOBILE UNIT HAS THIS DAY BEEN MADE AND YOU ARE HEREBY NOTIFIED OF THE VIOLATIONS FOUND UNDER ORS 624, OAR 333-162 AND OAR 333-150. SUCH VIOLATIONS MAY RESULT IN DENIAL, SUSPENSION, OR REVOCATION OF YOUR LICENSE; OR CLOSURE OF THE UNIT MAY RESULT FROM UNCORRECTED VIOLATIONS. YOU MAY OBTAIN A CONTESTED CASE HEARING FOR ANY DENIAL, SUSPENSION, REVOCATION OR CLOSURE BY CONTACTING THE LICENSING AGENCY. SUCH HEARINGS ARE IN ACCORDANCE WITH ORS CHAPTER 183.

THE PURPOSE OF THIS VISIT IS A SEMI ANNUAL INSPECTION OF THE MOBILE UNIT.

COLD HOLDING ITEMS CHECKED

MILK FRIDGE: CHOCOLATE MILK 40F

HOMESTYLE FRIDGE: BURRIOTS 41F

FREEZERS LOOK GOOD

ALL FOOD REPAIRED ON SITE

MICROWAVE IS CLEAN AND IN GOOD CONDITION

SANITIZER 50PPM BL

THERMOMETERS ARE PROVIDED

FOOD CONTACT SURFACES ARE CLEAN

NON FOOD CONTACT SURFACES ARE IN GOOD REPAIR

OUTER OPENINGS ARE CLOSED

333-170-0130(2)

VIOLATION OF OAR 333-170-0130 *PRIORITY FOUNDATION* Designated handwashing facilities are not available or accessible for handwashing, specifically:

THE HANDWASHING SINK WAS NOT OPEN AND ACCESSIBLE

REQUIRED CORRECTION: CORRECT IMMEDIATELY. Handwashing facilities that are designated in a sink compartment used for dishwashing must not be used to store or wash soiled dishes, or prepare food during food preparation and service.

KEEP HANDWASHING SINK FREE OF BLEACH BUCKET AND OTHER OBSTRUCTIONS AT ALL TIMES TO PROMOTE HANDWASHING.

3-304.12

VIOLATION OF SECTION 3-304.12 In-use dispensing utensils are not properly stored, specifically:

THE ICE SCOOP IS STORED DIRECTLY ON ICE

REQUIRED CORRECTION: In-use food preparation or dispensing utensils shall be stored: 1) in the food with the handles above the top of the food; 2) on a clean portion of the food preparation table or cooking equipment if they are cleaned and sanitized as r

PLEASE STORE SCOOPS SO THAT THE HANDLE THAT YOUR BARES HANDS COME IN CONTACT WITH IS NOT TOUCHING READY-TO-EAT FOODS SUCH AS ICE OR FOOD CONTACT SURFACES.

990

This facility has #____ food handlers with #____ having valid food handler certificates.

REMEMBER TO WASH HANDS BETWEEN HANDLING MONEY AND MAKING DRINKS.

Site Report Generated: 6/23/2017 3:44:34 PM

Person In Charge

Inspection By: Melissa Kauffman

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