

County of Kings - Department of Public Health

Environmental Health Serivces Division 330 Campus Drive Hanford, CA 93230

Phone - 559-584-1411 Fax - 559-584-6040 Internet - www.countyofkings.com/ehs

FOOD SAFETY EVALUATION REPORT

FACILITY NAME:		BUSINESS PHONE:		RECORD ID#:	DATE:		
CHASE INC K.C. 76		(559) 277-2828		PR0000427	November 21, 20	22	
FACILITY SITE ADDRESS:		CITY:		ZIP CODE:	INSPECTION TYP		
27574 BERNARD DR		KETTLEMAN CITY		93239	ROUTINE INSPE	CTION	
OWNER NAME:		CERTIFIED FOOD MAI	NAGER:	EXP DATE:	INSPECTOR:		
BOB SHIRALIAN					SEMHAR GEBREGZIABIHE		
The items (if any) listed below identify the violation. One reinspection will be conducted (if needed) at		-					
/iolation: IMPROPER CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-			101-114119]				
Description/Corrective Action:		ldew accumulation o as soon as possible.				nd	
General Comments:							_
Observations:							
Restrooms were fully stocked with ho	ot water, soap, a	and paper towels.					
All dry storage was well maintained a	ınd placed six iı	nchces above the gr	ound.				
All refrigeration units were functioning	g properly at 41	F and below.					
All freezer units were functioning pro	perly at 0F and	below.					
Overall the facility was observed in sa	atisfactory cond	dition. Contact the de	epartment shoul	ld you have any	questions.		
Thank you for your time.							
				Reinspection	Required: Yes	: No: [X
RESULTS OF EVALUATION: X PASS N		EDS IMPROVEMENT	FAIL	Reinspection	Date (on or after):	N/A	
				Potential Food Saf	ety All Star:		
\mathcal{A}							
and			C	SEMHAD CEDD	FC7IARIHE		
		_		SEMHAR GEBREGZIABIHE			
Received By:				Agency Repre	sentative		

NOTE: This report must be made available to the public on request

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: CHASE INC K.C. 76	BUSINESS PHONE: (559) 277-2828	RECORD ID#: PR0000427	DATE: February 16, 2022					
FACILITY SITE ADDRESS: 27574 BERNARD DR	CITY: KETTLEMAN CITY	ZIP CODE: 93239	INSPECTION TYPE: ROUTINE INSPECTION					
OWNER NAME: BOB SHIRALIAN	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: Luis Flores - REHS					
The items (if any) listed below identify the violation(s) that must be corrected. Thank you for your cooperation. One reinspection will be conducted (if needed) at no charge. A service fee is assessed for each additional reinspection required.								
Violation: None Noted								
General Comments:								
Both the walk-in box cooler and reach-in refrigerator storing luncheon foods were monitored holding temperatures of below 41 F. Good. This facility does not prepare and/or hold hot foods. The general store area, walk-in box cooler, and restrooms were all noted to be satisfactorily maintained. The back storage area was also ok.								
		Reinspection Re	equired: Yes: No: X					
RESULTS OF EVALUATION: X PASS NEED	DS IMPROVEMENT FAIL	Reinspection Da	ate (on or after): N/A					
		Potential Food Safety All Star:						
Eina		Luis Flores - REHS						
Received By:		Agency Representative						

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME:		BUSINESS PHONE:		RECORD ID#: PR0000427	DATE:		
CHASE INC K.C. 76		(559) 277-2828			December 10, 2021		
FACILITY SITE ADDRESS: 27574 BERNARD DR		CITY: KETTLEMAN CITY		ZIP CODE: 93239	INSPECTION TYPE: ROUTINE INSPECTION		
OWNER NAME:		CERTIFIED FOOD MANAGER:		EXP DATE:	INSPECTOR: Luis Flores - REHS		
BOB SHIRALIAN		Not Specified			Luis Flores - REHS		
The items (if any) listed below identify the violatio One reinspection will be conducted (if needed) at							
Violation: RESTROOM FACILITIES N	ED	[HSC 114250 & 114276]					
Description/Corrective Action:	Hot water to the hand-wash sink in the men's restroom was not readily provided after allowing to flow for an extended time period. This was not a problem in the women's rest-room. Have this looked into further and correct ASAP. Contact the inspector with an update on Monday to provide information on what corrective action will be taken to address this deficiency.						
Violation: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-11			113980, 114025-114027]				
Description/Corrective Action:	The inside top area of the ice machine was observed with slime accumulation which requires immediate and regular cleaning. At this time moisten a rag with soap and water to wipe off the slime. Than utilize another rag with a disinfectant to wipe the area as well.						
General Comments:							
All refrigeration equipment was observed to be operating at satisfactory temperatures.							
No hot foods are prepared at this retail facility.							
The retail area, walk-in box cooler, and storage areas were all observed in good operational condition.							
RESULTS OF EVALUATION: PASS X N			FAIL	Reinspection Re	equired: Yes: No: X		
		EDS IMPROVEMENT		Reinspection Da	ite (on or after): N/A		
				Potential Food Safety All Star:			
-Stephanie Received By:				Luis Flores - I			

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