



Restaurant Bakery Permit Inspection Report

Kings County Department of Public Health
Environmental Health Services
460 Kings County Dr., Suite 101 & 102 Hanford CA 93230
Phone - 559-584-1411 Fax - 559-584-6040
Internet - <https://www.kcdph.com/ehs>

INSPECTION REPORT

FOOD VENDING PERMIT - GR7 (>1 mil)

Facility Name	Facility Address	City/State	Zip Code	
KENTUCKY FRIED CHICKEN	1019 N LEMOORE AVE	LEMOORE, CA	93245	
Owner/Operator	Facility Phone No.	Inspection ID	Inspection Result	
ARGONAUT CALIFORNIA VENTURES INC	5599242744	65376	Pass	
Inspector Name	Inspection Date	Purpose of Inspection	Permit License	Expiration Date
REHS INSPECTOR	7/3/2025	Routine Inspection	PR0008991	1/1/2026

An inspection of your facility revealed the following violations of the California Health and Safety Code and/or California Code of Regulations. A reinspection may occur at any time to verify correction of these violations. Please note the date of correction as listed per violation.

NVO = No Violation Observed OUT = Out of Compliance N/A = Not Applicable COS = Corrected On Site UD = UD

Overall Inspection Comment:

Inspection on this date with Ray Washburn. The hand wash sinks in the kitchen and bathroom were stocked with paper towels, soap and warm water. Water at the three compartment sink reached the temperature above 120°F. QT levels for the sink was 200 ppm. All refrigerators maintained a temperature of 41°F or less. Food in the refrigerators was covered. Food in hot holding areas was maintained at 135°F (fried chicken, chicken strips, mashed potatoes, gravy, corn) or above. Food was stored 6 inches above the ground. The food prep area and floors, were clean. The hood and filters had no oil or grease buildup. The restaurant is receiving pest control service monthly. The beverage machine nozzles were clean. The food handler certificate expires July 17, 2026.

Inspection conducted by Keith Jahnke, REHS

ATTENTION: There are a total of 0 item(s) marked above in violation. Total Major violations are 0.

Signatures

Received By:

Inspected By:

Inspector Name: **REHS INSPECTOR**

Title: **Environmental Health Officer**

Date: **7/3/2025**

Phone: **559-584-1411**

Email: **ehs@co.kings.ca.us**



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Owner/Operator			Facility Phone No.		Inspection ID		Inspection Result	
ARGONAUT CALIFORNIA VENTURES INC			5599242744		51336		Pass	
Inspector Name		Inspection Date	Purpose of Inspection			Permit License		Expiration Date
Isaac Coria		12/12/2024	Routine Inspection			PR0008991		1/1/2026

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Violation Status	Violation Code	Violation Summary	Observation
FDA Food Code 2017			
☐ -Select- ☐ IN ☒ OUT ☐ NA ☐ NO	15 - PROTECTION FROM CONTAMINATION - Food separated and protected	Food was observed being stored on the floor of the freezer unit. Raw chicken(wrapped) was observed being stored on top of a cardboard container and liquid was seeping to box. Observed medium sized tub with a red liquid with no lid on it. Violations were corrected on-site by the operator.	
☐ -Select- ☐ IN ☒ OUT ☐ NA ☐ NO	22 - TIME AND TEMPERATURE CONTROL FOR SAFETY - Proper cold holding temperatures	Observed refridgeration unit under prep line was not operational, record temperatures to be around 65F. Operator fixed on-site and discarded all food(coleslaw) stored in the unit.	



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Overall Inspection Comment:

Handwashing sinks reached 100F, was fully stocked with soap and paper towels
3-Compartment Sink was properly set up, using Quat ammonia for sanitizer and water reaching 120F, recorded 200ppm concentration
Most refrigerator units reached under 41F
Hot holding food was recorded to be above 135F(mashed potatoes)
Observed all employees currently trained via KFC training modules and current Food handler card for managers was present.
Temperature logs were viewed to be adequately done.

ATTENTION: There are a total of 2 item(s) marked above in violation. Total Major violations are 0.

Signatures

Received By:

Inspected By:

Inspector Name: **Isaac Coria**

Title: **Environmental Health Officer**

Date: **12/12/2024**

Email: **Isaac.Coria@co.kings.ca.us**

Phone:

CERTIFICATION OF RETURN TO COMPLIANCE

I certify that the violations noted above on this report have been corrected. I have personally examined any documentation attached to the certification to establish that the violations have been corrected.

Signature: _____ Title: _____ Date: _____