Restaurant Bakery Permit Inspection Report
Kings County Department of Public Health
Environmental Health Services
330 Campus Dr. Hanford CA 93230
Phone - 559-584-1411 Fax - 559-584-6040
Internet - www.countyofkings.com/health/ehs

INSPECTION REPORT
FOOD VENDING PERMIT - NONPROFIT

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Facility Address</th>
<th>City/State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>SENIOR NUTRITION VIEW ROAD</td>
<td>602 9 1/4 AVE</td>
<td>HANFORD, CA</td>
<td>93230</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Owner/Operator</th>
<th>Facility Phone No.</th>
<th>Inspection ID</th>
<th>Inspection Result</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>30198</td>
<td>Pass</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Inspector Name</th>
<th>Inspection Date</th>
<th>Purpose of Inspection</th>
<th>Permit License</th>
<th>Expiration Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chaitanya Patel</td>
<td>2/15/2024</td>
<td>Routine Inspection</td>
<td>PR0003561</td>
<td>8/31/2024</td>
</tr>
</tbody>
</table>

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:
A routine inspection was conducted and following was observed.
No food is prepared at this facility. All food comes prepared from the Armina Senior Center in hot holding boxes. Food is only served at this facility.
Hot water temperature at the handwash sink noted above 100°F.
Hand wash sink was properly stocked with paper towels, soap, and running hot water.
Refrigeration units noted below 41°F. Proper refrigeration procedures were observed. Refrigeration unit contained some prepackaged fruit bowls and gallons of milk.
Food Handler certificate for Blanca Rodriguez active and present on site.
General cleanliness in good condition.

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

Received By: [Signature]

Inspected By: [Signature]

Inspector Name: Chaitanya Patel
Title: Environmental Health Officer I
Date: 2/15/2024
Phone: 559-584-1411
Email: Chaitanya.Patel@co.kings.ca.us
**FOOD SAFETY EVALUATION REPORT**

<table>
<thead>
<tr>
<th>FACILITY NAME:</th>
<th>BUSINESS PHONE:</th>
<th>RECORD ID#:</th>
<th>DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>SENIOR NUTRITION VIEW ROAD</td>
<td>(559) 583-9258</td>
<td>PR0003561</td>
<td>April 12, 2019</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>FACILITY SITE ADDRESS:</th>
<th>CITY:</th>
<th>ZIP CODE:</th>
<th>INSPECTION TYPE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>602 9 1/4 AVE</td>
<td>HANFORD</td>
<td>93230</td>
<td>ROUTINE INSPECTION</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OWNER NAME:</th>
<th>CERTIFIED FOOD MANAGER:</th>
<th>EXP DATE:</th>
<th>INSPECTOR:</th>
</tr>
</thead>
<tbody>
<tr>
<td>KING COUNTY COMMISSION ON AGING</td>
<td>MIRIAM SERPA</td>
<td>8/12/2020</td>
<td>Rumi Chhina</td>
</tr>
</tbody>
</table>

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:** IMPROPER MAINTENANCE OF HANDWASH FACILITIES  
[HSC 113953 - 113593.2]

**Description/Corrective Action:**  
Hand wash sink near restrooms were noted without soap. Please stock all the hand washing sinks with soap, paper towels and hot water.

**General Comments:**

- Food was prepared in adventist medical center and delivered in hot cases. Temperature was checked on delivery and before serving the lunch.

- Menu for today's lunch was almond chicken with poultry Gravy.

- During inspection temperature of food served was noted at 147 F.

- Overall facility is in good condition.

- Except for the above violation, restroom sinks were fully stocked with soap, paper towels and hot water was available.

**RESULTS OF EVALUATION:**  
- X PASS  
- ☐ NEEDS IMPROVEMENT  
- ☐ FAIL

**Reinspection Required:** ☐ Yes: ☐ No: X

**Reinspection Date (on or after):** N/A

**Potential Food Safety All Star:**

Received By: 

Rumi Chhina  
Agency Representative

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