



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 - GR4 (250-500)

Facility Name		Facility Address		City/State		Zip Code	
CHINA INN CHINESE RESTAURANT		102 LARISH ST		LEMOORE, CA		93245	
Owner/Operator		Facility Phone No.		Inspection ID		Inspection Result	
KIN WAH HOU		5599258688		35596		Needs Improvement	
Inspector Name		Inspection Date	Purpose of Inspection		Permit License		Expiration Date
Evelyn Elizalde		4/24/2024	Routine Inspection		PR0009676		3/1/2026

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

Violation Status	Violation Code	Violation Summary	Observation
FDA Food Code 2017			
<input type="checkbox"/> -Select- <input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	10 - PREVENTING CONTAMINATION BY HANDS - Adequate handwashing sinks properly supplied and accessible	Observed employee apron in the hand wash station. Hand wash stations should not have any obstructions and must be accessible at all times. Violation corrected on site.	
<input type="checkbox"/> -Select- <input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> NA <input type="checkbox"/> NO	15 - PROTECTION FROM CONTAMINATION - Food separated and protected	Observed raw chicken containers without a lid in the reach in refrigeration unit across from the stove. Please provide lids or cover to provide cross contamination. Observed uncovered Kikkoman Soy Sauce containers. Violation corrected on site.	
<input type="checkbox"/> -Select- <input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	51 - PHYSICAL FACILITIES - Plumbing installed, proper backflow devices	Observed improper wastewater plumbing line at the three compartment sink. Please make the necessary repairs so that the wastewater flows down into the floor drain.	
<input type="checkbox"/> -Select- <input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	55 - PHYSICAL FACILITIES - Physical facilities installed, maintained, and clean	Observed grease build up by the stove and in the hood. Please maintain area free and clean of grease to prevent a grease fire. Observed excess debris build up on the floors and walls throughout the kitchen. Please maintain clean.	



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 - GR4 (250-500)

Overall Inspection Comment:

The following was observed during today's routine inspection:

The three compartment sink had hot water above 120 F.
Refrigeration units were below 41F.
Hot holding foods were above 135 F.
All food was stored above 6 inches off of ground level.
Sanitizer buckets were available.

The facility has an active food managers certificate for Yuanwei Wu that expires on 2/26/25.

A reinspection will be conducted on or after May 8, 2024, to verify violations have been corrected.

ATTENTION: There are a total of 4 item(s) marked above in violation. Total Major violations are 0.

Signatures

Received By:



Inspected By:



Inspector Name: **Evelyn Elizalde**

Title: **Environmental Health Officer III**

Date: **4/24/2024**

Email: **Evelyn.Elizalde@co.kings.ca.us**

Phone: **(559) 584-1411**

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: _____