



County of Kings - Department of Public Health
Environmental Health Services 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: FAST N FRIENDLY	BUSINESS PHONE: (559) 582-7869	RECORD ID#: PR0003416	DATE: January 18, 2023
FACILITY SITE ADDRESS: 10890 14TH AVE	CITY: ARMONA	ZIP CODE: 93202	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: MOSA ALMUNTASER	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: Yatee Patel - 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:

Only pre-packaged items are sold, along with coffee and fountain drinks. Be sure to clean all the soda nozzles to avoid syrup accumulation.

The cold holding unit was 41F and lower.

Please continue to keep the store clean, all foods above the floor and up to date to avoid any possible vermin infestation.

Thank you

RESULTS OF EVALUATION: <input checked="" type="checkbox"/> PASS <input type="checkbox"/> NEEDS IMPROVEMENT <input type="checkbox"/> FAIL	Reinspection Required: Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/>
	Reinspection Date (on or after): <u> N/A </u> <input type="checkbox"/> Potential Food Safety All Star:

M. Salho

Yatee Patel - REHS

Received By:

Agency Representative

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: FAST N FRIENDLY	BUSINESS PHONE: (559) 582-7869	RECORD ID#: PR0003416	DATE: February 23, 2022
FACILITY SITE ADDRESS: 10890 14TH AVE	CITY: ARMONA	ZIP CODE: 93202	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: MOSA ALMUNTASER	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: RESTROOM FACILITIES NOT MAINTAINED [HSC 114250 & 114276]

Description/Corrective Action: The restroom toilet bowl was very dirty. Clean the toilet ASAP.

General Comments:

The walk-in box refrigeration unit and freezer unit temperatures were all monitored at good temperatures. This facility does not participate in the preparation of hot foods. The general store area, outside storage area, and walk-in box cooler were well organized and maintained.

RESULTS OF EVALUATION: <input checked="" type="checkbox"/> PASS <input type="checkbox"/> NEEDS IMPROVEMENT <input type="checkbox"/> FAIL	Reinspection Required: Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/>
	Reinspection Date (on or after): <u> N/A </u> <input type="checkbox"/> Potential Food Safety All Star:

[Handwritten signature]

Received By: _____

Luis Flores - REHS

Agency Representative

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