FOOD SAFETY EVALUATION REPORT

<table>
<thead>
<tr>
<th>FACILITY NAME:</th>
<th>JOHN MUIR SCHOOL</th>
</tr>
</thead>
<tbody>
<tr>
<td>BUSINESS PHONE:</td>
<td>(559) 992-8880Ext. 5132</td>
</tr>
<tr>
<td>RECORD ID#:</td>
<td>PR0000669</td>
</tr>
<tr>
<td>DATE:</td>
<td>October 25, 2022</td>
</tr>
<tr>
<td>FACILITY SITE ADDRESS:</td>
<td>707 LETTS AVE</td>
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<tr>
<td>CITY:</td>
<td>CORCORAN</td>
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<tr>
<td>ZIP CODE:</td>
<td>93212</td>
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<tr>
<td>INSPECTION TYPE:</td>
<td>ROUTINE INSPECTION</td>
</tr>
<tr>
<td>OWNER NAME:</td>
<td>CORCORAN UNIFIED SCHOOL DIST</td>
</tr>
<tr>
<td>CERTIFIED FOOD MANAGER:</td>
<td>Rebecca Lepez</td>
</tr>
<tr>
<td>EXP DATE:</td>
<td>1/26/2024</td>
</tr>
<tr>
<td>INSPECTOR:</td>
<td>SEMHAR GEBREGZIABIHE</td>
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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 CLEANING OF UTENSILS AND EQUIPMENT  
[HSC 114095-114099.5 & 114101-114119]  
Description/Corrective Action: Observed mildew accumulation on the ice machine, please have this cleaned and sanitized as soon as possible. Please clean and maintain this unit as soon as possible.

Violation: IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT  
[HSC 114161-114182 & 114257]  
Description/Corrective Action: Observed the walk-in freezer unit to be overstocked and inaccessible. Please properly maintain the items stored in this unit and so that it fully accessible.

General Comments:

Observations:

Hand washing station was fully stocked with hot water, soap, and paper towels.

Restrooms were fully stocked with hot water, soap, and paper towels.

Today's lunch is turkey sandwiches, baked beans, fresh fruit, and vegetables.

Hot holding temperature for baked beans was 156. F.

All refrigeration units were functioning properly at 41F and below.

The walk-in freezer units was functioning properly at -1.2F.

The manual dishwasher was functioning properly at 50 ppm (chlorine).

Hot water was available at the facility.

No signs of pests were found during today's inspection.

Overall the facility was observed in satisfactory condition. Please contact the department should you have any questions.

Thank you for your time.

NOTE: This report must be made available to the public on request
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RESULTS OF EVALUATION:  
- [X] PASS  
- [ ] NEEDS IMPROVEMENT  
- [ ] FAIL

Reinspeion Required:  
- [ ] Yes:  
- [X] No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:  
- [ ]

Received By: 

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NOTE: This report must be made available to the public on request
FOOD SAFETY EVALUATION REPORT

FACILITY NAME: JOhn MUIR SCHOOL
BUSINESS PHONE: (559) 992-8880 Ext. 5132
RECORD ID#: PR0000669
DATE: May 16, 2022

FACILITY SITE ADDRESS: 707 LETTS AVE
CITY: CORCORAN
ZIP CODE: 93212
INSPECTION TYPE: ROUTINE INSPECTION

OWNER NAME: CORCORAN UNIFIED SCHOOL DIST
CERTIFIED FOOD MANAGER: ANA DOMINGUEZ
EXP DATE: 1/26/2024
INSPECTOR: MIKEL CHATELLE - 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:

*All food temperatures met State Food requirements.
*All food items that were stored in refrigerators were measured at or below 41 F.
*All food items that were stored in hot holding units were measured at or above 135 F.
*All food items that were stored in freezers were frozen.
*The hand washing station(s) in the kitchen supplied hot water and had soap and paper towels available.
*The restroom sink supplied hot water and had soap and paper towels available.
*The quaternary ammonium sanitizing solution was measured at 200 ppm.
*Overall, the facility was observed to be satisfactory.

*Anna Dominguez was present for the inspection.

RESULTS OF EVALUATION: PASS

Reinspection Required: Yes: No: X

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

MIKEL CHATELLE - REHS

Agency Representative

NOTE: This report must be made available to the public on request
FOOD SAFETY EVALUATION REPORT

FACILITY NAME: JOHN MUIR SCHOOL
FACILITY SITE ADDRESS: 707 LETTS AVE
OWNER NAME: CORCORAN UNIFIED SCHOOL DIST

BUSINESS PHONE: (559) 992-8880Ext. 5132
CITY: CORCORAN
CERTIFIED FOOD MANAGER: ANA DOMINGUEZ

RECORD ID#: PR0000669
ZIP CODE: 93212
EXP DATE: 1/26/2024
INSPECTOR: Luis Flores - REHS

DATE: November 02, 2021
INSPECTION TYPE: ROUTINE INSPECTION

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:
All monitored refrigerated food temperatures were below 41 F.
Baked beans being held in the steam table were monitored at 180 F.
The food service area was determined to be well organized and maintained.
The chlorine concentration level in the final rinse cycle of the low temp dish-wash machine was satisfactory at or above 50 ppm.

RESULTS OF EVALUATION: PASS

Reinspection Required: Yes: No: X
Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Anna Dominguez

Received By: Luis Flores - REHS
Agency Representative

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