



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: PIZZA FACTORY	BUSINESS PHONE: Not Specified	RECORD ID#: PR0000655	DATE: October 13, 2022
FACILITY SITE ADDRESS: 1117 WHITLEY AVE	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: TROY VANVELSON	CERTIFIED FOOD MANAGER: Troy Van Velson	EXP DATE: 5/17/2021	INSPECTOR: SEM HAR GEBREGZIABIHE

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 the walls adjacent to the three compartment sink to have food and liquid debris build up. Ensure this is cleaned and maintained at all times. Please have this cleaned as soon as possible.

Observed the hood to be dirty with grease accumulation, please have the hood serviced as soon as possible.

Violation: NO CURRENT CERTIFIED FOOD SAFETY PERSON ON STAFF [HSC 113947-113947.6]

Description/Corrective Action: Repeat Violation: The facility does not have active Food manager card. The manager of the facility stated she would obtain the card as soon as possible. Please send a copy of the certification by no later than 10/27/2022.

Violation: IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

Description/Corrective Action: Observed the racks in the walk in refrigerator to be rusted. All food storage equipment must be non- absorbent, easily cleanable, and non porous material. Please have the storage racks replaced as soon as possible.

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.

All refrigeration units were functioning properly at 41F.

All dry storage units were well maintained, clean, and placed six inches above the ground.

The seating area was clean and maintained.

Please correct the above noted deficiencies in a timely manner.

Please contact the department should you have any questions.

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



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OWNER NAME: TROY VANVELSON	CERTIFIED FOOD MANAGER: Troy Van Velson	EXP DATE: 5/17/2021	INSPECTOR: SEM HAR GEBREGZIABIHE

The items (if any) listed below identify the violation(s) that must be corrected. Thank you for your cooperation.
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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): N/A <input type="checkbox"/> Potential Food Safety All Star:
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Received By:

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: PIZZA FACTORY	BUSINESS PHONE: Not Specified	RECORD ID#: PR0000655	DATE: July 20, 2021
FACILITY SITE ADDRESS: 1117 WHITLEY AVE	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: TROY VANVELSON	CERTIFIED FOOD MANAGER: Troy Van Velson	EXP DATE: 5/17/2021	INSPECTOR: Paven Bath

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: NO CURRENT CERTIFIED FOOD SAFETY PERSON ON STAFF [HSC 113947-113947.6]

Description/Corrective Action: Regulatory requirements such as an active Food Safety Manager Certification is not obtained by this facility. Provide a copy of an updated Food Safety Manager Certification to this department within 30 days.

General Comments:

Temperature Control: Hot holding temperatures (i.e., bbq chicken pizza was measured at 188F) were measured above 135F.
Cold holding temperatures (i.e., reach-in refrigerator was measured at 39F) were measured below 41F.
Handwashing Facilities: Restroom sink and Handwashing sink in the kitchen prep area were maintained stocked.
General Food Safety: All cold foods in the walk-in refrigerator were properly covered.
Vermin Control: Pest control is serviced on a monthly basis at this facility.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Paven Bath

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: PIZZA FACTORY	BUSINESS PHONE: Not Specified	RECORD ID#: PR0000655	DATE: September 28, 2020
FACILITY SITE ADDRESS: 1117 WHITLEY AVE	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: TROY VANVELSON	CERTIFIED FOOD MANAGER: Troy Van Velson	EXP DATE: 5/17/2021	INSPECTOR: Paven Bath

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:

Temperature Control: Cold holding units and cold foods were measured below 41F. Hot foods were measured above 135F. For example, bbq chicken pizza was measured at 189F.

Equipment Maintenance: Ancillary equipment was observed to be functional.

Restroom & Hand Wash Station: Fully stocked (e.g., soap and paper towels) and adequate supply of hot water was present.

Other Comments: In response to the COVID-19 pandemic, please implement the State (CDPH) guidelines (i.e., maintain a physical distance of 6 feet between individuals, use EPA-approved disinfectants, etc.) with your business.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Paven Bath

Received By: _____

Agency Representative _____

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