



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: AVENAL ELEMENTARY SCHOOL	BUSINESS PHONE: (559) 386-9083Ext. 1085	RECORD ID#: PR0000530	DATE: November 18, 2022
FACILITY SITE ADDRESS: 500 S FIRST ST	CITY: AVENAL	ZIP CODE: 93204	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: REEF-SUNSET USD	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	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 MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

Description/Corrective Action: Observed one of the aisles in the dry storage room to be inaccessible, due to carts placed in the walkway. Please have these removed to allow full access.

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

Description/Corrective Action: The food manager cards posted were observed to be expired. Teresa D Paine's card expired on 03/21/22. Michelle C Molless expired on 5/10/2021. This was mentioned in a previous inspection and will need to be rectified as soon as possible. A copy of the certification will need to be sent to the department by 12/7/2022.

General Comments:

Observations:

Today's lunch is chicken tenders, grapes, and broccoli.

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

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

Sanitizer buckets were at 200 ppm (ammonium).

Hot holding units were functioning properly at 135F and above.

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

All freezer units were functioning properly at 0F and below.

The ice machine was in satisfactory condition.

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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OWNER NAME: REEF-SUNSET USD	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	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.

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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[Handwritten Signature]

SEM HAR GEBREGZIABIHE

Received By:

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: AVENAL ELEMENTARY SCHOOL	BUSINESS PHONE: (559) 386-9083Ext. 1085	RECORD ID#: PR0000530	DATE: December 06, 2021
FACILITY SITE ADDRESS: 500 S FIRST ST	CITY: AVENAL	ZIP CODE: 93204	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: REEF-SUNSET USD	CERTIFIED FOOD MANAGER: Teresa Paine	EXP DATE: 3/21/2022	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.
 The hand washing station(s) had soap and paper towels.
 The sanitizing solution used to clean food contact surfaces was within the acceptable range for quaternary Ammonium.
 All food items that were stored in the refrigerator were stored at or below 41 F.
 All food items that were stored in the hot holding unit were stored at or above 135 F.
 Overall, the facility was observed to be satisfactory.

Teresa Paine was present for the inspection.

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:

Received By: _____

MIKEL CHATELLE - REHS

Agency Representative _____

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