



Restaurant Bakery Permit Inspection Report

Kings County Department of Public Health
Environmental Health Services
330 Campus Dr. Hanford CA 93230
Phone - 559-584-1411 Fax - 559-584-6040
Internet - www.countyofkings.com/health/ehs

INSPECTION REPORT

FOOD VENDING PERMIT - GR6 (750- 1mil)

Facility Name	Facility Address	City/State	Zip Code	
LEMOORE STADIUM CINEMAS	400 FOLLETT ST	LEMOORE, CA	93245	
Owner/Operator	Facility Phone No.	Inspection ID	Inspection Result	
LEMOORE CINEMAS, CLP	8054611372	35817	Pass	
Inspector Name	Inspection Date	Purpose of Inspection	Permit License	Expiration Date
Chaitanya Patel	4/25/2024	Routine Inspection	PR0006163	2/1/2025

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

Overall Inspection Comment:

Routine Inspection was conducted and following was noted
Hot water temperature at the handwash sink and dishwasher sink were noted to be above 120°F. The dishwasher sink faucet has a leak. Please correct this leak prior to next routine inspection.
Hand wash sink was properly stocked with paper towels, soap, and running hot water.
Facility serves popcorn, sodas, nachos and dry storage snacks like candies.
Facility has a nacho cheese and chili dispenser machine. Maintain a temperature of 135F or above for this unit.
All items were stored at least 6 inches above ground in dry storage areas.
CO2 cannisters are secured in upright position. Soda nozzles noted clean.
General cleanliness in satisfactory condition.

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

Signatures

Received By:

Inspected By:

Inspector Name: **Chaitanya Patel**

Title: **Environmental Health Officer I**

Date: **4/25/2024**

Phone: **559-584-1411**

Email: **Chaitanya.Patel@co.kings.ca.us**



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: LEMOORE STADIUM CINEMAS	BUSINESS PHONE: (559) 924-2100	RECORD ID#: PR0006163	DATE: September 06, 2018
FACILITY SITE ADDRESS: 400 FOLLETT ST	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: LEMOORE CINEMAS, CLP	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: Abel Simon - 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: IMPROPER COLD HOLDING TEMPERATURE(S) [HSC 113996]

Description/Corrective Action: The temperature of the reach-in unit was noted to be at 46°F. Please note that this should be lowered to 41°F. Manger stated they would lower the temperature.

General Comments:

- The hand wash station was noted to be fully stocked.
- There was hot and cold water available in the sink inside the kitchen.
- All items were noted to be properly stored.
- The restrooms were noted to be fully stocked.
- 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:

Abel Simon - REHS

Received By: _____

Agency Representative _____

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