



Restaurant Bakery Permit Inspection Report

Kings County Department of Public Health
 Environmental Health Services
 460 Kings County Dr., Suite 101 & 102 Hanford CA 93230
 Phone - 559-584-1411 Fax - 559-584-6040
 Internet - <https://www.kcdph.com/ehs>

INSPECTION REPORT

FOOD VENDING PERMIT - GR3 (100-250)

Facility Name		Facility Address		City/State		Zip Code	
MI RANCHITO TAQUERIA		216 BECKY PEASE ST		KETTLEMAN CITY, CA		93239	
Owner/Operator		Facility Phone No.		Inspection ID		Inspection Result	
SANDRA VALADEZ		5599042635		62156		Pass	
Inspector Name		Inspection Date	Purpose of Inspection		Permit License		Expiration Date
Evelyn Elizalde		5/28/2025	Routine Inspection		PR0010509		1/1/2026

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

Violation Status	Violation Code	Violation Summary	Observation
FDA Food Code 2017			
☐ -Select- ☐ IN ☒ OUT ☐ N/A	35 - FOOD TEMPERATURE CONTROL - Approved thawing methods used	Observed improper thawing of shrimp stored by the three compartment sink. Violation corrected on site.	
☐ -Select- ☐ IN ☒ OUT ☐ N/A	55 - PHYSICAL FACILITIES - Physical facilities installed, maintained, and clean	Observed broken faucet in food preparation sink. Please make the necessary repairs to the sink.	



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Overall Inspection Comment:

The following was observed during today's routine inspection:

All hand wash sinks were stocked with paper towels, and soap.

All hand wash stations reached a temperature of 100F.

The 3 compartment sink reached 120F and had sanitizer (bleach) available. Please ensure test strips are accessible at all times.

All refrigeration units were below 41F.

Hot holding foods on the steam table were above 135 F.

ATTENTION: There are a total of 2 item(s) marked above in violation. Total Major violations are 0.

Signatures

Received By:

Inspected By:

Inspector Name: **Evelyn Elizalde**

Title: **Environmental Health Officer III**

Date: **5/28/2025**

Email: **Evelyn.Elizalde@co.kings.ca.us**

Phone: **(559) 584-1411**

CERTIFICATION OF RETURN TO COMPLIANCE

I certify that the violations noted above on this report have been corrected. I have personally examined any documentation attached to the certification to establish that the violations have been corrected.

Signature: _____ Title: _____ Date: _____