



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: ORANGE AVENUE MARKET	BUSINESS PHONE: (559) 992-5708	RECORD ID#: PR0009099	DATE: February 28, 2022
FACILITY SITE ADDRESS: 1400 ORANGE AVE	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: AAISH AHMED/JAMAL AHMED	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	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 items and beverages stored in the refrigerator were stored at or below 41 F.
- *The restroom sink supplied hot water and had soap and paper towels available.
- *Overall, the facility was observed to be satisfactory.
- *Jamal Ahmed 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:

MIKEL CHATELLE - REHS

Received By: _____

Agency Representative

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: ORANGE AVENUE MARKET	BUSINESS PHONE: (559) 992-5708	RECORD ID#: PR0009099	DATE: July 13, 2021
FACILITY SITE ADDRESS: 1400 ORANGE AVE	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: AAISH AHMED/JAMAL AHMED	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	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: IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

Description/Corrective Action: Ensure to remove unnecessary items from the following areas of the facility:

- General store area
- Walk-in refrigeration unit
- Back storage area

Please note, the facility shall be free of clutter in order to allow proper pathway access.

General Comments:

All cold holding temperatures were noted to be below 41F.
Restroom: Maintain stocked (i.e., soap and paper towels) with a proper supply of hot water.
Other comments: Ensure to correct the violations noted above in a timely manner.

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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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: ORANGE AVENUE MARKET	BUSINESS PHONE: (559) 992-5708	RECORD ID#: PR0009099	DATE: March 10, 2021
FACILITY SITE ADDRESS: 1400 ORANGE AVE	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: AAISH AHMED/JAMAL AHMED	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	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: IMPROPER MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

Description/Corrective Action: Replace dish soap with an approved hand washing soap to ensure proper hand washing practices are being conducted by this facility.

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

Description/Corrective Action: The facility is in need of a regular, thorough cleaning including the restroom, soda cabinetry, floor, etc. Ensure to clean facility on a routine basis.

General Comments:

No hot holding or food preparation is allowed at this food facility. All food products stored at this facility are prepackaged.
Refrigeration unit was measured at 38F.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

No Signature obtained for COVID-19 Protocol

Paven Bath

Received By:

Agency Representative

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OFFICIAL INSPECTION REPORT

FACILITY NAME: ORANGE AVENUE GROCERY	BUSINESS PHONE: (559) 992-5708	RECORD ID#: PR0009099	DATE: March 26, 2020
FACILITY SITE ADDRESS: 1400 ORANGE AVE	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: PUBLIC INFORMATION/EDUCATIOI
OWNER NAME: AAISH AHMED/JAMAL AHMED	Program Description: 1107 - KINGS DPH COVID-19	EXP DATE:	INSPECTOR: Paven Batth

The items (if any) listed below identify the Health Code 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:

At this time all food sales are for DELIVERY or TAKE-OUT/PICK-UP ONLY.

The staff is aware of social distancing by requesting that customers keep apart a minimum of six feet from each other and staff. Only allow entry to customers that can safely keep the same distance between them while they wait or encourage them to wait in their cars.

Staff is practicing safe food handling procedures to protect food from contamination, monitor hot & cold holding temperatures, and WASH HANDS.

Staff uses sanitizing solution (chlorine 100ppm or QAC 200ppm) for wiping down all counters and work surfaces to reduce the risk of contamination. All work surfaces should be cleaned and sanitized frequently to prevent contamination.

Under no circumstances are employees who feel sick or are sick with respiratory (i.e. fever, coughing or sneezing) or gastrointestinal (i.e. vomiting or diarrhea) symptoms are allowed to work in the facility.

This facility was inspected today to review and verify the above food and employee safety practices are being followed. Please contact our Department for further questions.

Reinspection Required: Yes: No: Reinspection Date (on or after): Not Specified

Paven Batth

Environmental Health Specialist

Received By: