FOOD SAFETY EVALUATION REPORT

<table>
<thead>
<tr>
<th>FACILITY NAME:</th>
<th>BUSINESS PHONE:</th>
<th>RECORD #:</th>
<th>DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>EL RANCHO CARNICERIA</td>
<td>(559) 924-5423</td>
<td>PR0005980</td>
<td>June 28, 2021</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FACILITY SITE ADDRESS:</th>
<th>CITY:</th>
<th>ZIP CODE:</th>
<th>INSPECTION TYPE:</th>
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<tbody>
<tr>
<td>335 HEINLEN ST</td>
<td>LEMOORE</td>
<td>93245</td>
<td>ROUTINE INSPECTION</td>
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<tr>
<th>OWNER NAME:</th>
<th>CERTIFIED FOOD MANAGER:</th>
<th>EXP DATE:</th>
<th>INSPECTOR:</th>
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<tbody>
<tr>
<td>PATRICIA GONZALEZ</td>
<td>Patricia Gonzalez</td>
<td>1/28/2021</td>
<td>Veronica Ochoa -REHS</td>
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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

**Description/Corrective Action:** The facility's restroom and back storage area was observed cluttered with empty bulk containers. All containers that are empty must be removed from the facility. Also, there was a non functioning freezer observed near the meat department. This non functioning freezer must be removed from the facility and it may be taken for disposal to King Waste Recycling Authority in Hanford, CA.

**Violation:** IMPROPER EXCLUSION OF VERMIN OR ANIMALS

**Description/Corrective Action:** Flies were observed in the facility as the front door to the facility was observed open at the time of the inspection. Should the front door be open, please have the fly curtain/fan on to deter flies from entering.

**Violation:** IMPROPER LABELING OF PREPACKAGED FOODS

**Description/Corrective Action:** The facility currently sells salsa and manteca that is purchased from a facility named Mini Max in Tulare, CA. The salsa and manteca were observed unlabeled and as a result, must be labeled with the facility's information of where they are being packaged, along with product name, ingredients in descending order, and content weight.

**Violation:** NO CURRENT CERTIFIED FOOD SAFETY PERSON ON STAFF

**Description/Corrective Action:** The facility's food manager certification has expired. As a result, a current food manager's certification must be obtained within the next 60 days. Once the certification is obtained, proof must be shown to our department.

**General Comments:**

Hand wash station was stocked with soap, paper towels, and hot water.
Cold holding units storing potentially hazardous foods measured at or below 41F.
Please work on correcting the noted violations.
FACILITY NAME: EL RANCHO CARNICERIA
BUSINESS PHONE: (559) 924-5423
RECORD ID#: PR0005980
DATE: June 28, 2021

FACILITY SITE ADDRESS:
335 HEINLEN ST
CITY: LEMOORE
ZIP CODE: 93245

OWNER NAME: PATRICIA GONZALEZ
CERTIFIED FOOD MANAGER: Patricia Gonzalez
EXP DATE: 1/28/2021

INSPECTOR: Veronica Ochoa -REHS
INSPECTION TYPE: ROUTINE INSPECTION

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:
PASS ☐ NEEDS IMPROVEMENT X FAIL ☐

Reinspection Required: Yes: ☐ No: X
Reinspection Date (on or after): N/A

Potential Food Safety All Star: ☐

Received By: Patricia

Veronica Ochoa -REHS
Agency Representative

NOTE: This report must be made available to the public on request
FOOD SAFETY EVALUATION REPORT

FACILITY NAME: EL RANCHO CARNICERIA
BUSINESS PHONE: (559) 924-5423
RECORD ID#: PR0005980
DATE: October 09, 2019

FACILITY SITE ADDRESS: 335 HEINLEN ST
CITY: LEMOORE
ZIP CODE: 93245
INSPECTION TYPE: ROUTINE INSPECTION

OWNER NAME: PATRICIA GONZALEZ
CERTIFIED FOOD MANAGER: Patricia Gonzalez
EXP DATE: 1/28/2021
INSPECTOR: Veronica Ochoa - 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 MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]
Description/Corrective Action: The facility's restroom was observed being used for food storage. The restroom cannot be used for food storage whatsoever.

The facility's mop sink area was observed very cluttered to the point where it cannot be used. Please make sure to organize this area so that it can utilized.

Any freezers that are no longer in use must be removed from the facility. Please work on removing any items that are not used for the facility's operation.

The three compartment sink nozzle needs to be replaced so that water does not spray out.

Violation: IMPROPER MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113953.2]
Description/Corrective Action: The hand wash station in the meat department area soap dispenser was not functioning and the paper towel dispenser was loose on the wall. Please make sure the soap dispenser is in good working order and secure the paper towel dispenser to the wall.

Violation: IMPROPER HANDWASHING PROCEDURES BY FOODHANDLERS [HSC 113953-113953.4]
Description/Corrective Action: The employee working in the meat department was observed handling raw chicken and then cutting cheese without washing their hands. It is important that employees wash their hands after finishing a task to begin a new task.

Violation: IMPROPER LABELING OF PREPACKAGED FOODS [HSC 114089-114090]
Description/Corrective Action: Tamarind candy and some type of nut candy made from Mexico was observed on the store shelves without appropriate labels. It is crucial that any prepackaged item that is to be sold to the public must be labeled from the manufacturer with English labeling. All improperly labeled prepackaged goods must be removed from the shelves immediately.

General Comments:

Cold holding units measured at or below 41F.

Please correct the noted violations immediately.

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RESULTS OF EVALUATION: [ ] PASS [x] NEEDS IMPROVEMENT [ ] FAIL

Reinspection Required: [ ] Yes: [x] No: [ ]

Reinspection Date (on or after): N/A

Potential Food Safety All Star: [ ]

[Signature] Patricia Gonzalez

Received By: Patricia Gonzalez

Agency Representative: Veronica Ochoa -REHS

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