## FOOD SAFETY EVALUATION REPORT

**FACILITY NAME:** J & A MARKET  
**BUSINESS PHONE:** (559) 992-4490  
**RECORD ID#:** PR0000350  
**DATE:** April 25, 2022

**FACILITY SITE ADDRESS:** 1909 S DAIRY AVE  
**CITY:** CORCORAN  
**ZIP CODE:** 93212  
**INSPECTION TYPE:** ROUTINE INSPECTION

**OWNER NAME:** ABDULLA MOHAMED NASER SHOUFER  
**CERTIFIED FOOD MANAGER:** ABDULLA SHOUFER  
**EXP DATE:** 4/23/2024  
**INSPECTOR:** MIKEL CHATELLE - REHS

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**FOOD SAFETY EVALUATION REPORT**

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 FOOD HANDLING PRACTICES  
**[HSC 113961 - 113973]**

**Description/Corrective Action:** A bag of onions was observed directly on the floor next to the two compartment warewashing sink. An employee moved the bag onto a storage rack. The violation was corrected on site.

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

**Description/Corrective Action:** An accumulation of debris and dirt was observed on the kitchen floor. Remove debris and dirt from the kitchen floor. Ensure that the kitchen floor is cleaned on a routine basis.

### Violation: IMPROPER CLEANING OF UTENSILS AND EQUIPMENT  
**[HSC 114095-114099.5 & 114101-114119]**

**Description/Corrective Action:** It was identified that the utensils and equipment in the sink were being cleaned without a sanitizing solution. A sanitizing solution was available for use by employees and the owner/operator made a sanitizing solution to clean utensils and equipment. Ensure that utensils and food contact surfaces are disinfected with an approved sanitizing solution.

### Violation: IMPROPER CLEANING OF UTENSILS AND EQUIPMENT  
**[HSC 114095-114099.5 & 114101-114119]**

**Description/Corrective Action:** An ice scoop was observed directly on a shelf that is next to the ice maker in the kitchen. An employee moved the scoop to a designated storage container. The violation was corrected on site.

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**General Comments:**

*All food temperatures met State Food requirements.  
*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.  
*The hand washing station(s) in the kitchen supplied hot water and had soap and paper towels available.  
*The restroom sink supplied hot water and had soap and paper towels available.  
*Overall, the facility was observed to be satisfactory.

Abdulla Shoufer was present for the inspection.

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

Results of Evaluation: 
- [ ] PASS
- [X] NEEDS IMPROVEMENT
- [ ] FAIL

Reinspection Required: Yes: [ ] No: [x]
Reinspection Date (on or after): N/A
Potential Food Safety All Star: [ ]

Received By: [Signature]

MIKEL CHATELLE - REHS
Agency Representative

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**BUSINESS PHONE:** (559) 992-4490  
**CITY:** CORCORAN  
**ZIP CODE:** 93212  
**RECORD ID#:** PR0000350  
**DATE:** June 08, 2021  
**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.

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<td><strong>IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT</strong></td>
<td>Observed leaking underneath the 3-compartment sink. Call for service and retain invoice for review.</td>
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| **IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT** | The general store area was observed to be cluttered. Remove unnecessary items from the noted area to ensure proper pathway access.

Dust accumulation was observed on the food products stored on shelving in the general store area. Ensure to clean such items and facility equipment on a routine basis. |
| **IMPROPER HANDWASHING PROCEDURES BY FOODHANDLERS** | No paper towels were observed in the following areas:

- Employee restroom
- Handwashing sink near the front register.

Ensure all handwashing facilities are maintain stocked in order to validate proper handwashing procedures are taking place by employees at this facility. |
| **UNNECESSARY ITEMS AND LITTER** | Observed the back storage room to be cluttered. Remove all unnecessary items to ensure proper maintenance is upheld by this facility. |

**General Comments:**

- Temperature: Proper cold and hot holding temperatures were measured at this facility.
- California Food Safety Certification: Regulatory requirements such as certifications for food safety (i.e., Food Safety Manager Certification) are obtained by this facility.
- Other Comments: Ensure to correct the violations noted above in a timely manner.

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Results of Evaluation: ☐ PASS ☐ NEEDS IMPROVEMENT ☐ FAIL
Reinspection Required: ☐ Yes: ☐ No: X
Reinspection Date (on or after): N/A

Potential Food Safety All Star: ☐