FOOD SAFETY EVALUATION REPORT

<table>
<thead>
<tr>
<th>FACILITY NAME:</th>
<th>BUSINESS PHONE:</th>
<th>RECORD ID#:</th>
<th>DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>AVENAL THEATER AND EVENT CENTER</td>
<td>(559) 633-3116</td>
<td>PR0010552</td>
<td>September 29, 2021</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FACILITY SITE ADDRESS:</th>
<th>CITY:</th>
<th>ZIP CODE:</th>
<th>INSPECTION TYPE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>233 E KINGS ST</td>
<td>(none)</td>
<td>93204</td>
<td>ROUTINE INSPECTION</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OWNER NAME:</th>
<th>CERTIFIED FOOD MANAGER:</th>
<th>EXP DATE:</th>
<th>INSPECTOR:</th>
</tr>
</thead>
<tbody>
<tr>
<td>CITY OF AVENAL</td>
<td>Not Specified</td>
<td></td>
<td>Veronica Ochoa -REHS</td>
</tr>
</tbody>
</table>

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: NO CURRENT CERTIFIED FOOD SAFETY PERSON ON STAFF

**Description/Corrective Action:** The facility's need to obtain a food manager certification prior to opening and operating the concession stand. When the certificate has been obtained, please send a copy to our department via email.

### Violation: IMPROPER MAINTENANCE OF HANDWASH FACILITIES

**Description/Corrective Action:** The hand wash station at the concession area needs to have a mounted soap dispenser. Also, the large men's restrooms need to have two soap dispensers installed. For the kitchen area of the theater, please install paper towel dispensers for the hand sinks.

The hot water temperature at the kitchen hand wash sinks did not have adequate hot water. At a minimum the hot water temperature must reach 100F.

### Violation: IMPROPER COLD HOLDING TEMPERATURE(S)

**Description/Corrective Action:** The refrigerator in the kitchen area measured at 47F. Please adjust the temperature so the refrigerator portion measures at 41F or below.

General Comments:

The City of Avenal has not officially opened this facility to the public but it wanting to do so in the near future. Please make sure the violations noted above are addressed prior to opening to the public. The facility may rent out the kitchen portion of the facility once the violations have been corrected; however, only minor food prep would be allowed as the kitchen is not equipped for extensive food preparation. Please ensure the dishwasher is functional with hot water prior to allowing the rental of the kitchen.

Reinspection Required: Yes: ☐ No: ☒

Reinspection Date (on or after): N/A

Potential Food Safety All Star: ☐

Received By: [Signature]

Veronica Ochoa -REHS
Agency Representative

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

FACILITY NAME: AVENAL THEATER AND EVENT CENTER
BUSINESS PHONE: (559) 633-3116
RECORD ID#: PR0010552
DATE: March 18, 2019

FACILITY SITE ADDRESS:
233 E KINGS ST
CITY: AVENAL
ZIP CODE: 93204
INSPECTION TYPE: ROUTINE INSPECTION

OWNER NAME: CITY OF AVENAL
CERTIFIED FOOD MANAGER: Not Specified
EXP DATE: 
INSPECTOR: Veronica Ochoa - REHS

The items (if any) listed below identify the violation(s) that must be corrected. Thank you for your cooperation. One reinspeetion will be conducted (if needed) at no charge. A service fee is assessed for each additional reinspection required.

Violation: NO CURRENT CERTIFIED FOOD SAFETY PERSON ON STAFF [HSC 113947-113947.6]

Description/Corrective Action: Someone from the facility must take and pass the food manager's course within 60 days. Once the certificate is obtained, please make sure to provide a copy to our Department. Failure to obtain a copy of a certified food manager's certificate may result in suspension/revocation of the facility's food vending permit.

General Comments:

This facility only serves pre-packaged food (i.e. chips, candy), popcorn, and canned beverages at their concession stand. Once in a while, the facility will warm bagged nacho cheese in a crockpot and serve it over pre-packaged chips. The hand wash station was stocked with hot water, soap, and paper towels.

This facility may continue to operate; however, please make sure to obtain a food manager's certification.

RESULTS OF EVALUATION: X PASS □ NEEDS IMPROVEMENT □ FAIL

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

Potential Food Safety All Star:

Veronica Ochoa - REHS
Agency Representative

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

<table>
<thead>
<tr>
<th>FACILITY NAME:</th>
<th>AVENAL THEATER</th>
<th>BUSINESS PHONE:</th>
<th>(559) 386-1500</th>
<th>RECORD ID#:</th>
<th>PR0005414</th>
<th>DATE:</th>
<th>January 22, 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>FACILITY SITE ADDRESS:</td>
<td>233 E KINGS ST</td>
<td>CITY:</td>
<td>AVENAL</td>
<td>ZIP CODE:</td>
<td>93204</td>
<td>INSPECTION TYPE:</td>
<td>CONSTRUCTION/EQUIPMENT INSPEC</td>
</tr>
<tr>
<td>OWNER NAME:</td>
<td>REEL TIME ENTERTAINMENT</td>
<td>CERTIFIED FOOD MANAGER:</td>
<td>Not Specified</td>
<td>EXP DATE:</td>
<td>INSPECTOR:</td>
<td>Vikram Manke</td>
<td></td>
</tr>
</tbody>
</table>

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:

This inspection was conducted to check existing construction standards for the concession stand in Avenal movie theater. The following were observed:

- Hand wash sink had soap, paper towels, and warm water supply.
- Floors, walls, and ceiling were in good condition.
- All cabinets and storage closet were observed in satisfactory condition.
- Facility plans to sell prepackaged foods, nachos, and hot dogs only.
- This is limited food prep facility. No cooking is allowed in this concession kitchen.
- Thoroughly clean the facility to remove all dust/debris.
- Contact a pest control provider to treat the concession area.

After the above mentioned items are complied with and after a food vending permit is obtained from our department, the concession can be opened to be public.

**RESULTS OF EVALUATION:**

- ☐ PASS
- ☐ NEEDS IMPROVEMENT
- ☐ FAIL

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

Potential Food Safety All Star:

---

**Vikram Manke**
Agency Representative

---

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