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 NUTRITION CENTER</td>
<td>(559) 386-5861</td>
<td>PR0003562</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>108 W KINGS ST</td>
<td>AVENAL</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>KINGS COUNTY COMMISSION ON AGING</td>
<td>BOBBIE WARTSON</td>
<td>8/12/2015</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 current certified food manager for this facility has expired. Please make sure that someone obtains a certified food manager certification. When the certificate has been obtained, please submit a copy to our department via email. Currently, the senior portion of the facility is not in operation.

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

**Description/Corrective Action:** The facility's silver refrigerator measured above 41°F. Please monitor this unit to ensure the refrigerator maintains potentially hazardous foods at 41°F or below. If the unit is not holding at proper temperatures, please have the unit serviced.

**Violation:** RESTROOM FACILITIES NOT MAINTAINED

**Description/Corrective Action:** One of the sinks in the women's restroom was not equipped with hot water. Please ensure all hand wash sinks are equipped with hot water.

**Violation:** IMPROPER MAINTENANCE OF HANDWASH FACILITIES

**Description/Corrective Action:** Please install a paper towel dispenser for the hand wash sink in the kitchen area.

General Comments:

The senior nutrition center refrigerator measured at 39°F.
The facility was mostly equipped with hot water at all sinks.

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<tr>
<th>RESULTS OF EVALUATION:</th>
<th>Reinspection Required:</th>
<th>Reinspection Date (on or after):</th>
</tr>
</thead>
<tbody>
<tr>
<td>PASS</td>
<td>No: x</td>
<td>N/A</td>
</tr>
</tbody>
</table>

General Comments:

The senior nutrition center refrigerator measured at 39°F.
The facility was mostly equipped with hot water at all sinks.

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 NUTRITION CENTER
FACILITY SITE ADDRESS: 108 W KINGS ST
OWNER NAME: KINGS COUNTY COMMISSION ON AGING
CERTIFIED FOOD MANAGER: BOBBIE WARTSON
BUSINESS PHONE: (559) 386-5861
CITY: AVENAL
ZIP CODE: 93204
EXP DATE: 8/12/2015
RECORD ID#: PR0003562
DATE: August 01, 2019
INSPECTION TYPE: ROUTINE INSPECTION
INSPECTOR: Rumi Chhina

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:

Conducted a routine inspection of this facility and noted the following:

- Today's Menu is: Chicken tacos, Lettuce tomato onion cheddar cheese, Refried beans, spanish brown rice, salsa. The food was prepared in Hanford community hospital Kitchen.

- The temperature of the foods in the warmer were noted at or above 135F.

- Temperature logs were available on site.

- The temperature of the foods in cold holding units were noted at or below 41F.

- Digital thermometer was available on site.

- Hand washing station was fully stocked with soap, paper towels and hot water available.

RESULTS OF EVALUATION: □ PASS □ NEEDS IMPROVEMENT □ FAIL

Reinspection Required: □ Yes: □ No: X
Reinspection Date (on or after): N/A
Potential Food Safety All Star:

Received By: Rumi Chhina
Agency Representative

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<tr>
<td>AVENAL NUTRITION CENTER</td>
<td>(559) 386-5861</td>
<td>PR003562</td>
<td>July 11, 2018</td>
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<tr>
<td>KINGS COUNTY COMMISSION ON AGING</td>
<td>Joe Hinojosa</td>
<td>7/12/2020</td>
<td>Abel Simon - 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 [HSC 114161-114182 & 114257]

**Description/Corrective Action:**
Observed the ice machine to have a slime build up inside the lip of the ice maker. Please be sure to discard ice and wipe down the lip of the unit. Please be sure to keep up with regular housekeeping of this unit.

**General Comments:**
The hand wash sink was observed to be fully stocked.
The temperature of the food that was in a hot holding box was noted to be above 135°F.
The food served today was hamburgers, salad, and prepackaged snacks. The food is brought from Adventist Center in Hanford.
The temperature of the refrigerator was noted to be at 41°F.
The restroom was noted to be stocked.
Thank you.

**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:

**Abel Simon - REHS**
Agency Representative

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