



## 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](http://www.countyofkings.com/ehs)

### FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> LEMOORE FOOD CENTER	<b>BUSINESS PHONE:</b> (559) 547-0530	<b>RECORD ID#:</b> PR0010033	<b>DATE:</b> June 29, 2022
<b>FACILITY SITE ADDRESS:</b> 150 E CINNAMON DR	<b>CITY:</b> LEMOORE	<b>ZIP CODE:</b> 93245	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> SAEED MOHAMED	<b>CERTIFIED FOOD MANAGER:</b> SAEED MOHAMED	<b>EXP DATE:</b> 11/22/2021	<b>INSPECTOR:</b> 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:** NO CURRENT CERTIFIED FOOD SAFETY PERSON ON STAFF [HSC 113947-113947.6]

**Description/Corrective Action:** The facility's food manager certification has expired. Please send the food manager certification within the next 60 days to our department.

**Violation:** IMPROPER MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

**Description/Corrective Action:** The hand wash station near the three compartment sink that is used for the produce area was not equipped with a functioning soap dispenser or soap in the dispenser. The meat department area did not have soap in the hand wash soap dispenser or paper towels for the hand wash station. All hand wash station must have hot water, soap, and paper towels.

**Violation:** IMPROPER THAWING OF FROZEN FOODS [HSC 114020]

**Description/Corrective Action:** Frozen chicken in the meat department area was observed submerged in water at the three compartment sink and sitting at ambient temperature in the preparation sink. The employee on duty in the meat department was made aware that there are only four ways to thaw food which include: under cool running water, in a refrigerator, in a microwave, and during the cooking process.

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

**Description/Corrective Action:** The three compartment sink in the meat department area and the three compartment sink that is used for produce were not equipped with sanitizer (bleach or quaternary ammonia).

**Violation:** OTHER PERMIT VIOLATION

**Description/Corrective Action:** This facility was observed starting to barbecue for the day in the facility's parking lot. This facility does not have permission to barbecue because the facility is not equipped with an approved kitchen to conduct such practice. The facility was found to have a temporary station adjacent to the facility's cash register that has been used to prepare and cut all cooked food as well as hot hold. This facility must discontinue the practice of barbecuing because the facility is not equipped with a kitchen that would allow for the barbecuing to occur. The facility is welcome to submit construction plans to our department as well as the City of Lemoore in order to construct a permitted kitchen within the facility. The use of a barbecuer would have to be approved by the City of Lemoore Fire Department and the City of Lemoore.

**General Comments:**

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



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<b>OWNER NAME:</b> SAEED MOHAMED	<b>CERTIFIED FOOD MANAGER:</b> SAEED MOHAMED	<b>EXP DATE:</b> 11/22/2021	<b>INSPECTOR:</b> 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.

Today's routine inspection took place in conjunction with the City of Lemoore Fire Department. During today's inspection, the use of an unapproved barbecuer was observed in operation. As a result, the facility was told to no longer barbecue onsite until such activity has been approved by Kings County Environmental Health, City of Lemoore Fire Department, and the City of Lemoore.

The facility's cold holding units measured at or below 41F.

The facility currently sells chicharon in the meat department area that is purchased from M&J and proof of purchase was shown during today's inspection. Please ensure any prepackaged food item is labeled with the product name, facility name, and ingredients in descending order.

Please ensure to correct the noted violations 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:

Veronica Ochoa -REHS

Received By: \_\_\_\_\_

Agency Representative

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### FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> LEMOORE FOOD CENTER	<b>BUSINESS PHONE:</b> (559) 547-0530	<b>RECORD ID#:</b> PR0010033	<b>DATE:</b> February 26, 2020
<b>FACILITY SITE ADDRESS:</b> 150 E CINNAMON DR	<b>CITY:</b> LEMOORE	<b>ZIP CODE:</b> 93245	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> SAEED MOHAMED	<b>CERTIFIED FOOD MANAGER:</b> SAEED MOHAMED	<b>EXP DATE:</b> 11/22/2021	<b>INSPECTOR:</b> Susan Lee-Yang - 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:** SPOILED OR ADULTERATED FOOD PRODUCTS DISPLAYED [HSC 113980 & 114055]

**Description/Corrective Action:** Observed and removed the following cans from sales shelves due to being dented:  
-one 19.75 oz can of La Costerna Whole Pinto Beans  
-one 25.9 oz can of La Costerna Jalapenos  
Ensure dented and/or swollen cans are removed from sales shelves and are not sold to customers.

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

**Description/Corrective Action:** Observed large exposed holes in the wall across from the restrooms.  
Repair exposed holes.

Observed several wall and floor tiles in the meat department missing or cracked.  
Replace cracked or missing tiles.

Observed the hand wash sink in the meat department draining very slow.  
Repair unit and ensure the hand wash sink drains properly.

Discharge pipe of the 3-compartment sink located in the meat department was observed missing.  
Replace missing pipe to ensure water is discharged into the floor sink.

Observed two pedestal support pieces missing from the 3-compartment sink located in the meat department.  
Replace missing support pieces to ensure the 3-compartment sink is stable and secured.

Observed water leaking from spray nozzle of 3-compartment sink located in the meat department.  
Repair/replace unit to ensure water does not leak.

Observed the back storage room and walk-in freezer with trash accumulation.  
Observed trash and food debris accumulated underneath the meat cold storage cases, floor junctures, and walls in the meat department.  
Ensure thorough cleaning occurs to prevent accumulation.

**Violation:** IMPROPER MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

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FOOD SAFETY EVALUATION REPORT

Table with 4 columns: FACILITY NAME, BUSINESS PHONE, RECORD ID#, DATE, FACILITY SITE ADDRESS, CITY, ZIP CODE, INSPECTION TYPE, OWNER NAME, CERTIFIED FOOD MANAGER, EXP DATE, INSPECTOR.

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.

- Description/Corrective Action: Observed water leaking from pipes of the hand wash station located in the meat department. Repair/replace pipes to prevent water from leaking. Observed exposed holes in the wall behind the hand wash station and by the 3-compartment sink. Repair exposed holes.

General Comments:

Hand wash station and restrooms had hot water, soap, and paper towels. Ensure towels and soap and stocked inside the dispensers. Observed produce walk-in refrigerator and general sales floor clean and organized. Cold holding units were noted at or below 41F. Observed proper thawing of frozen shrimp in the meat department. Hot water in the meat department was noted above 150F. Recommend lowering temperature of the hot water heater. Hot water for hand wash stations must be at least 100F and at least 120F for 3-compartment sinks. A re-inspection will be performed at no charge to verify compliance with today's noted violations. Should additional re-inspections be required, the facility will be assessed \$226 per inspection.

RESULTS OF EVALUATION: [ ] PASS [X] NEEDS IMPROVEMENT [ ] FAIL. Reinspection Required: Yes: [X] No: [ ] Reinspection Date (on or after): 3/11/2020 [ ] Potential Food Safety All Star:

Handwritten signature in blue ink.

Received By:

Susan Lee-Yang - REHS

Agency Representative

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