



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

HOUSING OFFICIAL INSPECTION REPORT

FACILITY NAME: BEST WESTERN INN & SUITES	BUSINESS PHONE: (916) 643-3652	RECORD ID#: PR0005168	DATE: April 18, 2022
FACILITY SITE ADDRESS: 33410 POWERS DR	CITY: KETTLEMAN CITY	ZIP CODE: 93239	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: HEMMA PATEL	Program Description: 1632 - 1632 HOTEL BREAKFAST	EXP DATE: 4/26/2022	INSPECTOR: SEM HAR GEBREGZIABIHE

The items (if any) listed below identify the Health Code 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 CLEANING OF UTENSILS AND EQUIPMENT Comply by 5/3/2022

[HSC 114095-114099.5 & 114101-114119]

Description/Corrective Action: Observed syrup build up on the juice and coffee machine. Please clean this as soon as possible.

General Comments:

Routine Inspection:

Hand washing station was supplied with hot water, soap, and paper towels.

All dry storage was well maintained, organized, clean, and placed six inches above the ground.

The three compartment sink was not in use at the time of the inspection, but was in good condition and had hot water.

All refrigeration units were functioning properly at 41F and below.

All freezer units were functioning properly at 0F and below.

Overall this facility is in good condition.

Thank you for your time.

Reinspection Required: Yes: No: Reinspection Date (on or after): Not Specified

Received By:

SEM HAR GEBREGZIABIHE

Agency Representative



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: BEST WESTERN INN & SUITES	BUSINESS PHONE: (916) 351-1213Ext. 224	RECORD ID#: PR0005168	DATE: July 14, 2021
FACILITY SITE ADDRESS: 33410 POWERS DR	CITY: KETTLEMAN CITY	ZIP CODE: 93239	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: HEMMA PATEL	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: Luis Flores - 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: None Noted

General Comments:

An inspection of the continental breakfast revealed the kitchen area is very well maintained and operated. All refrigerated units were found to be in good working order at temperatures typically well below 41F.

The small yogurt storing refrigeration unit was observed to be icing over. The operator was informed to move the held products to another unit and unplug the unit in order to allow for defrosting.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Luis Flores - REHS

Received By:

Agency Representative

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