



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

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.

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

Description/Corrective Action: Observed interior of the ice machine with mildew accumulation. Ensure thorough and regular cleaning occurs to prevent accumulation.

Violation: SPOILED OR ADULTERATED FOOD PRODUCTS DISPLAYED [HSC 113980 & 114055]

Description/Corrective Action: Observed numerous severely dented cans on the shelves. Instructed staff to remove and discard dented cans.

General Comments:

Hand wash station has hot water, soap, and paper towels.

All cold holding units were noted at or below 41F.

Observed food products stored off the ground.

Due to COVID, the facility is serving breakfast to go in packaged bags.

Observed dead cockroaches on traps. Facility has monthly pest control services. Increase pest control services if needed. Did not observe live cockroaches at time of inspection.

A copy of the unsigned report will be emailed to the owner. Contact our office at 559-584-1411 if there are any questions.

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:

Susan Lee-Yang - REHS

Agency Representative

Received By:

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



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FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> THE SALVATION ARMY	<b>BUSINESS PHONE:</b> (559) 582-4434	<b>RECORD ID#:</b> PR0000489	<b>DATE:</b> January 24, 2020
<b>FACILITY SITE ADDRESS:</b> 380 E IVY	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> SALVATION ARMY	<b>CERTIFIED FOOD MANAGER:</b> Kristine Brumm	<b>EXP DATE:</b> 12/8/2020	<b>INSPECTOR:</b> Liliana Stransky - 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:

Routine inspection -

\* Observed refrigerator at 28F and freezer below 0F.

\* Hand washing station had soap, paper towels and hot water available.

\* Chlorine sanitizer for the final rinse cycle in the dishwasher was at 50ppm.

\* Dry food storage was above the floor a minimum of 6 inches.

Overall the facility was observed well maintained.

Thank you!

RESULTS OF EVALUATION:  PASS  NEEDS IMPROVEMENT  FAIL

Reinspection Required: Yes:  No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Received By:

Liliana Stransky - REHS

Agency Representative

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FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> THE SALVATION ARMY	<b>BUSINESS PHONE:</b> (559) 582-4434	<b>RECORD ID#:</b> PR0000489	<b>DATE:</b> January 03, 2019
<b>FACILITY SITE ADDRESS:</b> 380 E IVY	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> SALVATION ARMY	<b>CERTIFIED FOOD MANAGER:</b> Kristine Brumm	<b>EXP DATE:</b> 12/8/2020	<b>INSPECTOR:</b> Liliana Stransky - 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:

Conducted routine inspection of the kitchen and made the following observations:

\* The hand washing station had hand soap and hot water available. Please replace the batteries for the paper towel dispenser. A paper towel roll was also available.

\* Refrigerators were holding temperature below 41F. The outdoor walk-in units were also noted below 41F.

\* The dishwasher rinse cycle had 100ppm chlorine sanitizer concentration.

Overall the kitchen and food storage areas were observed well maintained and orderly. Please remove the dust buildup from the hood area to prevent it from falling over food during preparation.

Thank you!

RESULTS OF EVALUATION:  PASS  NEEDS IMPROVEMENT  FAIL

Reinspection Required: Yes:  No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Received By:

Liliana Stransky - REHS

Agency Representative

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