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>FREEZE STYLE FROZEN YOGURT</td>
<td>(559) 589-9570</td>
<td>PR0009179</td>
<td>April 06, 2018</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FACILITY SITE ADDRESS:</th>
<th>CITY:</th>
<th>ZIP CODE:</th>
<th>INSPECTION TYPE:</th>
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</thead>
<tbody>
<tr>
<td>566 N 11TH AVE</td>
<td>HANFORD</td>
<td>93230</td>
<td>ROUTINE INSPECTION</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th>OWNER NAME:</th>
<th>CERTIFIED FOOD MANAGER:</th>
<th>EXP DATE:</th>
<th>INSPECTOR:</th>
</tr>
</thead>
<tbody>
<tr>
<td>ANGEL DE LOS SANTOS</td>
<td>ANGEL DE LOS SANTOS</td>
<td>5/20/2018</td>
<td>Liliana Stransky - 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: None Noted

General Comments:

A routine inspection was attempted and the building was found empty with a "for lease" sign at the door. The facility file will be closed.

Results of Evaluation: 

<table>
<thead>
<tr>
<th>RESULTS OF EVALUATION:</th>
<th>PASS</th>
<th>NEEDS IMPROVEMENT</th>
<th>FAIL</th>
</tr>
</thead>
</table>

Reinspection Required: Yes: No: X

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

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

**FACILITY NAME:** FREEZE STYLE FROZEN YOGURT  
**BUSINESS PHONE:** (559) 589-9570  
**RECORD ID#:** PR0009179  
**DATE:** October 17, 2017

**FACILITY SITE ADDRESS:** 566 N 11TH AVE  
**CITY:** HANFORD  
**ZIP CODE:** 93230  
**INSPECTION TYPE:** ROUTINE INSPECTION

**OWNER NAME:** ANGEL DE LOS SANTOS  
**CERTIFIED FOOD MANAGER:** ANGEL DE LOS SANTOS  
**EXP DATE:** 5/20/2018  
**INSPECTOR:** Lupe Tapia

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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:** Clean and sanitize mop sink and floor sink to remove mildew, dirt, debris.

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**General Comments:**

Conducting a routine inspection at this facility:

- Hand wash sinks accessible and fully stocked
- Hot and cold water available throughout the facility's sinks
- Approved both cold <41F and hot >135F foods
- Pest Control:
- Food distributor:

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**RESULTS OF EVALUATION:**  
- [X] PASS  
- [ ] NEEDS IMPROVEMENT  
- [ ] FAIL

**Reinspection Required:** Yes: [X] No: [ ]

**Reinspection Date (on or after):** N/A

---

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

Received By:  
Lupe Tapia  
Agency Representative
FOOD SAFETY EVALUATION REPORT

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<td>566 N 11TH AVE</td>
<td>HANFORD</td>
<td>93230</td>
<td>1ST FOLLOW UP INSPECTION</td>
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<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:** None Noted

**General Comments:**

A follow-up re-inspection was performed today of this facility to verify compliance with required corrective actions for violations noted on the last routine inspection which resulted in a closure of the facility. The following was noted during today's inspection:

Hot water was available throughout the facility. Store owner stated that the reason there was no hot water available in the routine inspection was because a breaker was out and had not been switched on. The temperature of the water in the three compartment sink was able to reach 120°F. There was hot water available in the bathroom and hand wash sink.

The reach-in cold holding unit was noted to be holding temperature below 41°F.

The hand wash station was fully stocked.

All items in the dry storage area were observed to be above the floor six inches.

Thank you for correcting the above noted issue in a timely manner. This facility is now approved to re-open.

**RESULTS OF EVALUATION:**

- [x] PASS
- [ ] NEEDS IMPROVEMENT
- [ ] FAIL

**Reinspection Required:**

- [ ] Yes
- [x] No

**Reinspection Date (on or after):** N/A

**Agency Representative:**

Abel Simon - REHS

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