**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**

<table>
<thead>
<tr>
<th>FACILITY NAME:</th>
<th>BUSINESS PHONE:</th>
<th>RECORD ID#:</th>
<th>DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>SEQUOIA INN</td>
<td>(559) 582-0336</td>
<td>PR0005147</td>
<td>March 18, 2022</td>
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<table>
<thead>
<tr>
<th>FACILITY SITE ADDRESS:</th>
<th>CITY:</th>
<th>ZIP CODE:</th>
<th>INSPECTION TYPE:</th>
</tr>
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<tbody>
<tr>
<td>1655 MALL DR</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>Program Description:</th>
<th>EXP DATE:</th>
<th>INSPECTOR:</th>
</tr>
</thead>
<tbody>
<tr>
<td>SANTA ROSA RANCHERIA</td>
<td>1632 - 1632 HOTEL BREAKFAST</td>
<td>10/20/2019</td>
<td>SEMHAR GEBREGZIABIHE</td>
</tr>
</tbody>
</table>

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**  
[HSC 114005-114009.5 & 114101-114119]  
Comply by 4/2/2022

**Description/Corrective Action:**  
The floor and trash can under the sink was filthy. Please ensure all trash is properly contained to prevent the attraction of pests. Please clean this as soon as possible.

**General Comments:**

- Routine Inspection-

Hot water was available.

All dry storage was well maintained and six in inches above the ground.

The freezer unit was 0F and below.

The refrigerator unit was 41F and below.

Please correct the above violation in a timely manner.

Thank you for your time.

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

Signed:

Dorothy McFarland  
Agency Representative
FOOD SAFETY EVALUATION REPORT

FACILITY NAME: SEQUOIA INN
BUSINESS PHONE: (559) 582-0338
RECORD ID#: PR0005187
DATE: January 20, 2021

FACILITY SITE ADDRESS:
1655 MALL DR
CITY: HANFORD
ZIP CODE: 93230
INSPECTION TYPE:
ROUTINE INSPECTION

OWNER NAME:
SANTA ROSA RANCHERIA
CERTIFIED FOOD MANAGER:
MARThA VILLA
EXP DATE: 10/20/2019
INSPECTOR:
Paven Batth

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:
Hand Wash Station: Hot water, soap, and paper towels were readily available during the on-site inspection.
Temperature Control: Refrigerator in the kitchen was measured at or below 41F.
Maintenance: Kitchen was observed to be in good condition.
Other Comments: In response to the COVID-19 pandemic, please implement the State (CDPH) guidelines (i.e., maintain a physical distance of 6 feet between individuals, use EPA-approved disinfectants, etc.) with your business. In order to help mitigate the spread of COVID-19 (i.e., increase the risk of exposure), a signature was not obtained. The inspection report will be emailed to the facility's point of contact.

RESULTS OF EVALUATION: ☒ PASS ☐ NEEDS IMPROVEMENT ☐ FAIL
Reinspection Required: Yes: ☐ No: ☒
Reinspection Date (on or after): N/A
☐ Potential Food Safety All Star:

Paven Batth
Agency Representative

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

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<tbody>
<tr>
<td>SEQUOIA INN</td>
<td>(559) 582-0339</td>
<td>PR0005187</td>
<td>February 06, 2018</td>
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<th>INSPECTOR:</th>
</tr>
</thead>
<tbody>
<tr>
<td>SANTA ROSA RANCHERIA</td>
<td>Martha Villa</td>
<td>5/11/2016</td>
<td>Susan Lee-Yang - 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:

- Observed hand wash station stocked with hot water, soap, and paper towels.
- Ambient refrigerator was noted at 41°F.
- Observed all food products stored off the ground.
- Current Certified Food Manager certificate is expired. Forward updated certificate to our office within 30 days.

### RESULTS OF EVALUATION:

- **Pass**
- **Needs Improvement**
- **Fail**

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<td></td>
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- Potential Food Safety All Star:

Received By:  

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Susan Lee-Yang - REHS

Agency Representative

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