FOOD SAFETY EVALUATION REPORT

The manager for the wellness center, Maria Rodriguez, was contacted to schedule a routine annual inspection of the facility. Maria indicated over the phone that the center is currently closed due to Covid, and a reopening date has not been set. Please contact our department when the centers reopens to schedule an inspection.

Retain a copy of this report for your records and let us know if you have any questions.

Thank you!

General Comments:

Violation: None Noted

RESULTS OF EVALUATION: 

Reinspection Required: Yes: No: X
Reinspection Date (on or after): N/A
Potential Food Safety All Star:

Liliana Stransky - REHS
Agency Representative

NOTE: This report must be made available to the public on request
## 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>OAK WELLNESS CENTER</td>
<td>(559) 639-2076</td>
<td>PR0008349</td>
<td>February 16, 2021</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FACILITY SITE ADDRESS</th>
<th>CITY</th>
<th>ZIP CODE</th>
<th>INSPECTION TYPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1393 BAILEY DR</td>
<td>HANFORD</td>
<td>93230</td>
<td>MEETING/CONSULTATION/PHONE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OWNER NAME</th>
<th>Program Description</th>
<th>EXP DATE</th>
<th>INSPECTOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>OAK WELLNESS CENTER</td>
<td>1623 - 1623 FOOD VENDING PERMIT</td>
<td></td>
<td>Yatee Patel - REHS</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:** None Noted

**General Comments:**

Our department contacted the manager at 559-639-2081 and she stated that oak wellness center is currently closed due to renovation.

Please contact our department at 559-584-1411 to schedule a routine/reopening inspection for the kitchen.

Thank you

<table>
<thead>
<tr>
<th>Reinspection Required</th>
<th>Yes</th>
<th>No</th>
<th>Reinspection Date (on or after)</th>
<th>Not Specified</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Yatee Patel - REHS

Environmental Health Specialist
FOOD SAFETY EVALUATION REPORT

FACILITY NAME: OAK WELLNESS CENTER
FACILITY SITE ADDRESS: 1393 BAILEY DR
OWNER NAME: OAK WELLNESS CENTER

BUSINESS PHONE: (559) 639-2076
CITY: HANFORD
CERTIFIED FOOD MANAGER: Not Specified

RECORD ID#: PR0008349
ZIP CODE: 93230
EXP DATE: Not Specified

DATE: December 05, 2019
INSPECTION TYPE: ROUTINE INSPECTION
INSPECTOR: 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 -

The facility has temporarily relocated to 1633 N. 10th Avenue in Hanford due to a remodeling project at their location on Bailey Drive in the Kings View Behavioral building.

Currently, clients bring their own food and get sodas and snacks from the wellness center. The facility has a refrigerator for the sodas and a hand washing station that is fully stocked with hand soap, paper towels and hot water.

We will update our records to reflect the current address change. Please report any changes to the department and let us know when you move back to Bailey Drive.

Thank you!

RESULTS OF EVALUATION: X PASS ☐ NEEDS IMPROVEMENT ☐ FAIL

Reinspection Required: ☐ Yes: ☑ No: ☑
Reinspection Date (on or after): N/A
Literal: Potential Food Safety All Star:

Received By: [Signature]

Liliana Stransky - REHS
Agency Representative

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