



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

<b>FACILITY NAME:</b> WESTSIDE LOCKERS	<b>BUSINESS PHONE:</b> (559) 799-4212	<b>RECORD ID#:</b> PR0000158	<b>DATE:</b> August 18, 2021
<b>FACILITY SITE ADDRESS:</b> 10945 9TH AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> RICHARD ANDERSON	<b>CERTIFIED FOOD MANAGER:</b> Richard Anderson	<b>EXP DATE:</b> 11/3/2020	<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: NO CURRENT CERTIFIED FOOD SAFETY PERSON ON STAFF [HSC 113947-113947.6]

Description/Corrective Action: The food manager certification expired in 2020. Please forward a copy of the renewal within 30 days.

General Comments:

ROUTINE INSPECTION -

Observed the hand washing station with hand soap, paper towels and hot water was also available.

Every walk-in was noted below 41F. The reach in freezer by the front entrance was also functional.

Please address the noted deficiency in a timely manner.

Thank you!

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:

Liliana Stransky - REHS

Received By:

Agency Representative

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



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<b>FACILITY NAME:</b> WESTSIDE LOCKERS	<b>BUSINESS PHONE:</b> (559) 799-4212	<b>RECORD ID#:</b> PR0000158	<b>DATE:</b> June 12, 2019
<b>FACILITY SITE ADDRESS:</b> 10945 9TH AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> RICHARD ANDERSON	<b>CERTIFIED FOOD MANAGER:</b> Richard Anderson	<b>EXP DATE:</b> 11/3/2020	<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: IMPROPER MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

Description/Corrective Action: The hand washing station was observed with no paper towels and no hand soap. Please keep the dispensers stocked at all times.

General Comments:

Routine inspection conducted for the meat locker. The following observations were made:

- \* Refrigeration temperatures were noted at or below 41F.
- \* The small reach-in freezer in the lobby was observed functional. Food packages are properly labeled and stored in sealed packaging.
- \* The facility is licensed with CDFA for packaging meat products.

Please make sure to conduct daily cleaning and disinfecting of all raw meat contact surfaces to reduce the risk of cross-contamination.

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:

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<b>FACILITY NAME:</b> WESTSIDE LOCKERS	<b>BUSINESS PHONE:</b> (559) 799-4212	<b>RECORD ID#:</b> PR0000158	<b>DATE:</b> June 11, 2018
<b>FACILITY SITE ADDRESS:</b> 10945 9TH AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> RICHARD ANDERSON	<b>CERTIFIED FOOD MANAGER:</b> Richard Anderson	<b>EXP DATE:</b> 11/3/2020	<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: IMPROPER MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

Description/Corrective Action: The hand washing station had the paper towel dispenser empty. Restock the paper towels and have them available at all times for proper hand washing to take place.

General Comments:

Conducted a routine inspection of the facility and observed all the refrigeration units at or below 41F as required.

Food manger certification is maintained current.

Please correct the noted deficiency as soon as possible.

Thank you for your attention.

RESULTS OF EVALUATION: <input checked="" type="checkbox"/> PASS <input type="checkbox"/> NEEDS IMPROVEMENT <input type="checkbox"/> FAIL	Reinspection Required: Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/>
	Reinspection Date (on or after): N/A
	<input type="checkbox"/> Potential Food Safety All Star:

Received By:

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