FOOD SAFETY EVALUATION REPORT

<table>
<thead>
<tr>
<th>FACILITY NAME:</th>
<th>BUSINESS PHONE:</th>
<th>RECORD ID#:</th>
<th>DATE:</th>
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</thead>
<tbody>
<tr>
<td>SUBWAY #49465</td>
<td>(559) 589-1010</td>
<td>PR007358</td>
<td>May 11, 2022</td>
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<th>CITY:</th>
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<td>HANFORD</td>
<td>93230</td>
<td>ROUTINE INSPECTION</td>
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<th>INSPECTOR:</th>
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<td>BEANT S SANDHU</td>
<td>Sabrina Guzman</td>
<td>12/17/2024</td>
<td>SEMHAR GEBREGZIABIHE</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:** IMPROPER CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]

**Description/Corrective Action:**
The sanitizer bucket across from the warming units were observed below 200 ppm (ammonium). This was corrected on site when mentioned and retested at 200 ppm.

**General Comments:**

Observations:

- Restrooms were supplied with hot water, soap, and paper towels.
- Hand washing stations were fully stocked with hot water, soap, and paper towels.
- All dry storage was well maintained, clean, and organized.
- All refrigeration units were functioning properly at 41°F and below.
- The walk-in freezer was functioning properly at 0°F and below.
- All hot holding temperatures were above 135°F.
- Temperature, cleaning, and sanitation logs were available for review.
- Pest control report were available for review. No sign of pests were found during today's inspection.
- Of note during the inspection the operator was in the middle of deep cleaning the facility. All food prep remained separate from the cleaning process.
- The three compartment sink sanitizer was at 200 ppm (ammonium).
- Overall this facility is in satisfactory condition.

Thank you for your time.

NOTE: This report must be made available to the public on request.
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RESULTS OF EVALUATION:  
- [ ] PASS  
- [ ] NEEDS IMPROVEMENT  
- [x] FAIL

Reinspection Required:  
- [ ] Yes:  
- [x] No: 

Reinspection Date (on or after):  N/A

Potential Food Safety All Star:

[Signature]

Received By: SEMHAR GEBREGZIABIHE  
Agency Representative

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

FACILITY NAME: SUBWAY #49465
BUSINESS PHONE: (559) 589-1010
RECORD ID#: PR0007358
DATE: September 17, 2021

FACILITY SITE ADDRESS: 2597 N 11TH #104 AVE
CITY: HANFORD
ZIP CODE: 93230
INSPECTION TYPE: ROUTINE INSPECTION

OWNER NAME: BEANT S SANDHU
CERTIFIED FOOD MANAGER: Sabrina Guzman
EXP DATE: 12/17/2024
INSPECTOR: Yatee Patel - 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 hot water heater was turned off at the prep station due to maintenance. The operator was working on getting it turned on during the inspection. All other stations (3 compartment sink, prep sink and the inside hand washing station) had hot and cold running water. Fixed before the inspection was completed.

Please be sure that hot running water is available at the prep station at all times.

General Comments:
The walk-in and freezer were both below 30F.
Facility is going to order the correct paper towel dispenser. The roll paper towel dispenser is no longer in use due to the shortage of that kind of paper towel. Facility has paper towel for use for correct hand washing.
The sanitizer level at the 3 compartment sink was at 100ppm of QAC solution.
All cold and hot foods were satisfactory.
Please be sure to maintain facility and equipment and clean regularly.

Over all facility is in good condition.

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:

Received By: _______________________________
Yatee Patel - REHS
Agency Representative

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