



**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> HANFORD ELKS LODGE #1259	<b>BUSINESS PHONE:</b> (559) 584-7691	<b>RECORD ID#:</b> PR0000534	<b>DATE:</b> October 18, 2021
<b>FACILITY SITE ADDRESS:</b> 506 N DOUTY ST	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> HANFORD ELKS LODGE #1259	<b>CERTIFIED FOOD MANAGER:</b> Michelle M Adams	<b>EXP DATE:</b> 9/27/2021	<b>INSPECTOR:</b> 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:** None Noted

**General Comments:**

Facility observed with replaced new flooring, quarry tiles.  
 Hand washing station had hot water, soap and paper towel.  
 Dish washer had a final rinse of 180F.  
 All cold holding units were below 41F.  
 The bar area observed with hot water.  
 This facility is approved for a commissary use kitchen.  
 Facility at the time of inspection was in very good condition.  
 Thank you

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

Received By: \_\_\_\_\_

*Yatee Patel - REHS*

\_\_\_\_\_  
Agency Representative

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



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<b>FACILITY NAME:</b> HANFORD ELKS LODGE #1259	<b>BUSINESS PHONE:</b> (559) 584-7691	<b>RECORD ID#:</b> PR0000534	<b>DATE:</b> April 24, 2019
<b>FACILITY SITE ADDRESS:</b> 506 N DOUTY ST	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> HANFORD ELKS LODGE #1259	<b>CERTIFIED FOOD MANAGER:</b> Michelle M Adams	<b>EXP DATE:</b> 9/27/2021	<b>INSPECTOR:</b> Rumi Chhina

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:

Conducted a routine inspection in this facility and noted the following:

- Ambient temperature of refrigerator was noted at or below 41 F.
- Hand washing station was fully stocked with soap, paper towels and hot water.
- Kitchen hood is serviced every 6 months.
- Facility has high temperature dishwasher. During inspection, the temperature dial was not working properly. Please replace or repair the dial.

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

*Michelle Adams*

Rumi Chhina

Received By: \_\_\_\_\_

Agency Representative \_\_\_\_\_

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<b>FACILITY NAME:</b> HANFORD ELKS LODGE #1259	<b>BUSINESS PHONE:</b> (559) 584-7691	<b>RECORD ID#:</b> PR0000534	<b>DATE:</b> April 12, 2018
<b>FACILITY SITE ADDRESS:</b> 506 N DOUTY ST	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> HANFORD ELKS LODGE #1259	<b>CERTIFIED FOOD MANAGER:</b> Michelle M Adams	<b>EXP DATE:</b> 9/27/2021	<b>INSPECTOR:</b> Vikram Manke

The items (if any) listed below identify the violation(s) that must be corrected. Thank you for your cooperation.  
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**Violation:** IMPROPER EXCLUSION OF VERMIN OR ANIMALS [HSC 114259-114259.3]

**Description/Corrective Action:** A few mouse droppings were observed nearby the wall adjacent to the refrigerator. Operator informed that the facility is serviced by a pest control provider on a monthly basis. Clean the area and instruct pest control to perform a through inspection to identify entry points for vermin. Seal the crack/hole in the wall of dry food storage area.

**General Comments:**

Hand wash station had soap, paper towels, and warm water supply.  
 Three compartment sink had hot water supply and an available supply of sanitizer.  
 Ambient air temperature in the refrigerator was measured under required minimum of 41 F.  
 Restrooms were observed in satisfactory condition.

Please repair the broken final rinse temp gauge of the dishwashing machine.  
 Thoroughly clean the floor area underneath the equipment to remove dust/food debris.

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

*Michelle Adams*

*Vikram Manke*

Received By: \_\_\_\_\_

Agency Representative \_\_\_\_\_

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