



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> B & P LIQUOR	<b>BUSINESS PHONE:</b> (559) 584-6385	<b>RECORD ID#:</b> PR0000647	<b>DATE:</b> February 02, 2023
<b>FACILITY SITE ADDRESS:</b> 919 GARNER AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> KAMALJIT KAUR HEERA	<b>CERTIFIED FOOD MANAGER:</b> N/A	<b>EXP DATE:</b>	<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:**

Only pre-packaged items sold.

Facility was well organized.

Cold holding was at 41F and below for pre-packaged items like burritos.

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:

Yatee Patel - 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> B & P LIQUOR	<b>BUSINESS PHONE:</b> (559) 584-6385	<b>RECORD ID#:</b> PR0000647	<b>DATE:</b> January 25, 2022
<b>FACILITY SITE ADDRESS:</b> 919 GARNER AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> KAMALJIT KAUR HEERA	<b>CERTIFIED FOOD MANAGER:</b> N/A	<b>EXP DATE:</b>	<b>INSPECTOR:</b> SEM HAR GEBREGZIABIHE

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:**

Observations:

Restrooms were supplied with soap, hot water and paper towels.

All dry storage of food was well organized, clean, and six inches above the ground.

All refrigeration units holding milk, juice, deli meat, cheese, etc. were well organized functioning properly at 41F and below.

All freezer units were well maintained and 0F and below.

Overall well maintained facility.

Thank you for your time.

<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:

*Kamaljit Kaur Heera*

*SEM HAR GEBREGZIABIHE*

Received By:

Agency Representative

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<b>FACILITY NAME:</b> B & P LIQUOR	<b>BUSINESS PHONE:</b> (559) 584-6385	<b>RECORD ID#:</b> PR0000647	<b>DATE:</b> October 29, 2020
<b>FACILITY SITE ADDRESS:</b> 919 GARNER AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> KAMALJIT KAUR HEERA	<b>CERTIFIED FOOD MANAGER:</b> N/A	<b>EXP DATE:</b>	<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: FOODS FROM UNAPPROVED SOURCES

[HSC 114021 - 114029]

**Description/Corrective Action:** All food products sold from the store must be properly labeled with the product brand and ingredients. Remove the unlabeled frozen popsicles from La Michoacana's cold case. These cannot be sold to the public.

General Comments:

Routine inspection observations -

\* Refrigeration units were observed at or below 41F.

\* The restroom had hand soap and hot water. Paper towels were available but not on the holder. Please keep the dispenser full at all times.

\* In general the facility was observed clean and organized.

Only one employee was present at the store and she was observed not wearing a face cover. Please adhere to the state guidelines of wearing face masks and keeping safe social distance between customers. These are the recommended practices to follow during the pandemic to decrease the risk of spreading covid.

RESULTS OF EVALUATION:  PASS  NEEDS IMPROVEMENT  FAIL

Reinspection Required: Yes:  No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Received By:

Liliana Stransky - REHS

Agency Representative

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