

County of Kings - Department of Public Health

Environmental Health Serivces Division 330 Campus Drive Hanford, CA 93230

Phone - 559-584-1411 Fax - 559-584-6040 Internet - www.countyofkings.com/ehs

FOOD SAFETY EVALUATION REPORT

FACILITY NAME: CVS/PHARMACY #9828	BUSINESS PHONE: (401) 770-5324	RECORD ID#: PR0009589	DATE: January 23, 2023		
FACILITY SITE ADDRESS: 574 W LACEY BLVD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION		
OWNER NAME: LONGS DRUG STORES CALIFORNIA, LLC	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: Yatee Patel - REHS		
The items (if any) listed below identify the violation(s) that must be One reinspection will be conducted (if needed) at no charge. A serv					
Violation: None Noted					
General Comments:					
All pre-packaged food items were observed above the	ne floor.				
The store uses the FIFO method for rotating foods.					
The cold holding units are all electronically monitored	d.				
The restrooms are maintained by the staff regularly.					
Thank you					
		Reinspection I	Required: Yes: No: X		
RESULTS OF EVALUATION: X PASS NEED	DS IMPROVEMENT FAI	Reinspection I	Date (on or after): N/A		
			Potential Food Safety All Star:		
		Yatee Patel - REHS			
Received By:	· ———	Agency Repre	sentative		

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

DAVWJAMZT 1:18 PM Page 1 of 1



County of Kings - Department of Public Health

Environmental Health Serivces Division 330 Campus Drive Hanford, CA 93230

Phone - 559-584-1411 Fax - 559-584-6040 Internet - www.countyofkings.com/ehs

FOOD SAFETY EVALUATION REPORT

FACILITY NAME: CVS/PHARMACY #9828	BUSINESS PHONE: (401) 770-5324		RECORD ID#: PR0009589	DATE: January 19, 2022			
FACILITY SITE ADDRESS: 574 W LACEY BLVD	CITY: HANFORD		ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION			
OWNER NAME: LONGS DRUG STORES CALIFORNIA, LLC	CERTIFIED FOOD MANA Not Specified	GER:	EXP DATE:	INSPECTOR: SEMHAR GEBREGZIABIHE			
the items (if any) listed below identify the violation(s) that must be corrected. Thank you for your cooperation. The reinspection will be conducted (if needed) at no charge. A service fee is assessed for each additional reinspection required.							
Violation: IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]							
were not i	Although the lighting in the facility was in operation, the lights in the employee restroom were not in operation. This needs to be fixed as soon as possible, please let the inspector know via email once this problem is resolved.						
General Comments:							
Observations:							
All refrigeration units holding milk, cheese, deli meats, etc. were holding at 41F and below. Please make sure this stays consistent and adjust the temperature lower if needed.							
Freezer units were organized and were holding at 0F or below.							
All food was well organized and stored six inches above the floor throughout the store .							
Sanitizer was available for use for customers and employees.							
Besides the mentioned violation above, the employee and customer bathrooms were supplied with soap, hot water and paper towels.							
Overall well maintained facility.							
Thank you for your time.							
			Reinspection Re	quired: Yes: No: X			
RESULTS OF EVALUATION: X PASS N	EEDS IMPROVEMENT	FAIL	Reinspection Da	te (on or after): N/A			
			P	otential Food Safety All Star:			
			•				
W.		S	SEMHAR GEBREC	GZIABIHE			
Received By:	<u> </u>	Agency Representative					
MOTE, This is	NOTE: This report must be made available to the public on request						
NOTE: This report must be made available to the public on request							

DASESPFLM 12:25 PM Page 1 of 1



County of Kings - Department of Public Health

Environmental Health Serivces Division 330 Campus Drive Hanford, CA 93230 Phone - 559-584-1411 Fax - 559-584-6040 Internet - www.countyofkings.com/ehs

FOOD SAFETY EVALUATION REPORT

FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:	
CVS/PHARMACY #9828	(559) 582-2875	PR0009589	October 07, 2020	
FACILITY SITE ADDRESS:	CITY:	ZIP CODE:	INSPECTION TYPE:	
574 W LACEY BLVD	HANFORD	93230	ROUTINE INSPECTION	
OWNER NAME:	CERTIFIED FOOD MANAGER:	EXP DATE:	INSPECTOR:	
LONGS DRUG STORES CALIFORNIA, LLC	Not Specified		Liliana Stransky - REHS	
he items (if any) listed below identify the violation(s) that must be one reinspection will be conducted (if needed) at no charge. A ser				
Violation: None Noted				
General Comments:				
Routine inspection observations -				
* Refrigeration units were observed holding tempera minimum of six inches above the floor.	tures below 41F. Store the gallons	of milk inside the	walk-in a	
* One restroom had the hand washing station with s Restock the hand soap.	oap, paper towels and hot water, ar	nd the other lacke	d hand soap.	
* There were no expired baby products along the ba	by nutrition isle.			
* Overall, the store was observed well maintained.				
All employees were observed wearing face masks a additional barrier between customers and cashiers. pandemic.				
A copy of the unsigned report will be emailed to the 559-584-1411 if you have any questions.	operator for their facility records. P	lease contact our	department at	
RESULTS OF EVALUATION: X PASS NEE	DS IMPROVEMENT FAIL	Reinspection Re	equired: Yes: No: X	
		Reinspection Da	ate (on or after): N/A	
		F	Potential Food Safety All Star:	
		_		

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

DA0308151 12:02 PM Page 1 of 1