

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: BURGER KING	BUSINESS PHONE: (559) 738-8476	RECORD ID#: PR0010436	DATE: October 06, 2022		
FACILITY SITE ADDRESS: 2567 N 11TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION		
OWNER NAME: GARY GEIGER	CERTIFIED FOOD MANAGER: Jessica Castellon	EXP DATE: 7/7/2027	INSPECTOR: Evelyn Elizalde		
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 FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257] Description/Corrective Action: Observed debris build up on floors throughout facility. Please ensure floors, walls, and ceilings are clean and free of debris to prevent vermin infestation.					
General Comments: The following was observed during today's routine inspection: The three compartment sink had hot water at 120 F. All hand wash stations had hot water (100 F), soap and paper towels. Sanitizer buckets were available in the kitchen and food prep areas. All refrigeration units were at 41 F.					
RESULTS OF EVALUATION: X PASS NEED	OS IMPROVEMENT FAIL	Reinspection Ro Reinspection Da			
Freeived By:		Evelyn Eliza Agency Represe			



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:
BURGER KING	(559) 738-8476	PR0010436	July 13, 2021
FACILITY SITE ADDRESS:	CITY:	ZIP CODE:	INSPECTION TYPE:
2567 N 11TH AVE	HANFORD	93230	ROUTINE INSPECTION
OWNER NAME:	CERTIFIED FOOD MANAGER:	EXP DATE:	INSPECTOR:
GARY GEIGER	JESSICA CASTELLON	7/11/2022	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 FACILITY OR EQUIPMENT

[HSC 114161-114182 & 114257]

In general the facility requires deep cleaning of all non-food contact surfaces. The fryers had excess grease and food debris build-up. The reach-in refrigerator for the raw chicken preparation had waste water build-up inside the unit, and it was noted in need of cleaning. Food debris was noted around all floor areas, behind equipment, in the floor of the mop sink, over handles and other equipment surfaces.

Although no signs of pests were noted, all these areas must be maintained clean to minimize any risk of pest infestation.

General Comments:

ROUTINE INSPECTION -

Description/Corrective Action:

Observed cold and hot holding temperatures within satisfactory ranges. All refrigeration units, freezers and walk-in were observed at or below 41F. Hamburger patties were held between 140 and 152F.

Chlorine sanitizer for the dishwasher was noted at 50ppm. The sanitizer buckets had 200ppm of ammonia base concentration.

The hand washing station had soap, paper towels and hot water available.

Daily monitoring of cooking temperatures and safety equipment is tracked electronically and logs were available to review.

COVID safety procedures continue to be followed by employees and temperature monitoring is conducted for all visitors.

Please address the deficiency noted above in a timely manner.

Thank you!



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OWNER NAME: GARY GEIGER	CERTIFIED FOOD MANAGER: JESSICA CASTELLON	EXP DATE:INSPECTOR:7/11/2022Liliana Stransky - REHS	
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RESULTS OF EVALUATION: PASS X NEE	DS IMPROVEMENT FAIL		equired: Yes: No: X ate (on or after): N/A Potential Food Safety All Star:
San a Om		Liliana Stransky Agency Represe	



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:
BURGER KING	(559) 738-8476	PR0010436	December 06, 2019
FACILITY SITE ADDRESS:	CITY:	ZIP CODE:	INSPECTION TYPE:
2567 N 11TH AVE	HANFORD	93230	ROUTINE INSPECTION
OWNER NAME:	CERTIFIED FOOD MANAGER:	EXP DATE:	INSPECTOR:
GARY GEIGER	JESSICA CASTELLON	7/11/2022	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: INADEQUATE OR UNAPPROVED WATER SUPPLY

The hot water pressure for the handwashing station in the middle is not sufficient to properly wash hands. Call a certified plumber to fix the problem. In the mean time all employees must use the hand washing station in the front or at the 3 compartment sink.

General Comments:

General cleanliness, including 3 compartment sink, floors and some surfaces of equipment should be done on a regular basis.

All cold and hot holding foods were satisfactory.

Walk-in had all foods that were labeled well.

Description/Corrective Action:

Thank you

			Reinspection Required: Yes:	No: X	
RESULTS OF EVALUATION:	X PASS	NEEDS IMPROVEMENT	FAIL	Reinspection Date (on or after):	N/A
				Potential Food Safety A	All Star:

55 (4)

Yatee Patel - REHS

[HSC 114192]

Agency Representative

Received By: