



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

FACILITY NAME: LACEY INN	BUSINESS PHONE: (559) 582-9145	RECORD ID#: PR0008995	DATE: January 31, 2018
FACILITY SITE ADDRESS: 899 E LACEY BLVD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: JOE DA ROSA	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: Luis Flores - 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]

Description/Corrective Action: The store room ice machine was observed with slim growth on the interior ceiling of the unit as well as along the top door opening area. The owner agreed to clean the unit off with ammonium chloride solution.

Violation: FACILITY DOES NOT HAVE A VALID PERMIT [HSC 114381 (a)]

Description/Corrective Action: This facility has been under new ownership since July 2017. The new Joe Da Rosa. Mr. Da Rosa agreed to complete and submit a food vending application with the Department by tomorrow.

General Comments:

The facility was observed to be in overall good operational condition.

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

Received By:

Luis Flores - REHS
Agency Representative



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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: THE LACEY	BUSINESS PHONE: (559) 308-8068	RECORD ID#: PR0008995	DATE: April 08, 2021
FACILITY SITE ADDRESS: 899 E LACEY BLVD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: JOE DA ROSA	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: Luis Flores - 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:

Today's inspection revealed hot and cold water supply to all bar areas and both restrooms were functional that included functional hot water supply. Soap and paper towel dispensers were stocked.

The hot dog steamer was monitored holding at 134 F and higher.

The sanitizer level was checked and found to be above 200 PPM for ammonium chloride.

Note:

It is important for employees to wear face coverings during this Covid 19 time period. Please adhere to this Statewide Mandate Policy.

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

No signature obtained due to Covid-19

Luis Flores - REHS

Received By: _____

Agency Representative _____

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