



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: COLLEGE OF THE SEQUOIAS THE AVENUE	BUSINESS PHONE: (559) 730-3906	RECORD ID#: PR0010270	DATE: May 26, 2022
FACILITY SITE ADDRESS: 925 13TH AVE	CITY: HANFORD	ZIP CODE: 93277	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: COLLEGE OF THE SEQUOIAS	CERTIFIED FOOD MANAGER: ZACHARY PATTERSON	EXP DATE: 4/25/2022	INSPECTOR: 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:

Currently, this facility is closed for the summer.

Hand washing station was supplied with hot water, soap, and paper towels.

All dry storage was well maintained, clean, and placed six inches above the ground

All refrigeration units were functioning properly at 41F and below.

The ice machine was in satisfactory condition.

The three compartment sink had hot water and was in satisfactory condition.

Overall this facility was in satisfactory condition.

Thank you for your time.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): _____ N/A

Potential Food Safety All Star:

SEM HAR GEBREGZIABIHE

Received By: _____

Agency Representative

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: B & A FOOD MART	BUSINESS PHONE: (559) 750-7187	RECORD ID#: PR0010371	DATE: November 17, 2021
FACILITY SITE ADDRESS: 398 S 11TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: MUSSA KAID	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:

All refrigerated food temperatures were at below 41 F as required by the State of California.
The back storage area, walk-in box cooler, and general store area were all well maintained.

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:

Luis Flores - REHS

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: B & A FOOD MART	BUSINESS PHONE: (559) 750-7187	RECORD ID#: PR0010371	DATE: May 27, 2022
FACILITY SITE ADDRESS: 398 S 11TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: MUSSA KAID	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: 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: IMPROPER CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]

Description/Corrective Action: Observed the microwave with food debris. This was cleaned on site when mentioned.

General Comments:

Observations:

Restrooms were fully stocked with hot water, soap, and paper towels.

All dry storage was well maintained, clean, and placed six inches above the ground.

Hot holding temperatures of the pizza pockets, chicken tenders, bean and cheese burrito, corn dogs, and tornadoes were all observed at 135F and below.

The coffee station was observed in satisfactory condition.

The soda machines and slushy machines were in satisfactory condition.

Overall this facility is in satisfactory condition.

Thank you for your time.

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:

Received By: _____

SEM HAR GEBREGZIABIHE

Agency Representative

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