



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: 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 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 MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

Description/Corrective Action: 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.

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

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: CVS/PHARMACY #9828	BUSINESS PHONE: (559) 582-2875	RECORD ID#: PR0009589	DATE: October 07, 2020
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: 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: None Noted

General Comments:

Routine inspection observations -

* Refrigeration units were observed holding temperatures below 41F. Store the gallons of milk inside the walk-in a minimum of six inches above the floor.

* One restroom had the hand washing station with soap, paper towels and hot water, and the other lacked hand soap. Restock the hand soap.

* There were no expired baby products along the baby nutrition isle.

* Overall, the store was observed well maintained.

All employees were observed wearing face masks and practicing safe distancing. Plexi glass was installed along as an additional barrier between customers and cashiers. Thank you for continuing to follow the state guidelines during the pandemic.

A copy of the unsigned report will be emailed to the operator for their facility records. Please contact our department at 559-584-1411 if you have any questions.

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:

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: CVS/PHARMACY #9828	BUSINESS PHONE: (559) 582-2875	RECORD ID#: PR0009589	DATE: October 31, 2019
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: 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: None Noted

General Comments:

All pre-packaged food products were stored above the floor a minimum of 6 inches.

The cold storage units were observed below 41F.

Restroom facilities were observed well maintained.

Please make sure to contain all expired products off the floor (milk etc.) to prevent accidental spills.

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:

Received By:

Liliana Stransky - REHS

Agency Representative

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