



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: SEQUOIA CLUB	BUSINESS PHONE: (559) 587-1400	RECORD ID#: PR0000197	DATE: January 24, 2017
FACILITY SITE ADDRESS: 118 N IRWIN ST	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ROBERT LEE	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: Abel Simon - 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: RESTROOM FACILITIES NOT MAINTAINED

[HSC 114250 & 114276]

Description/Corrective Action: The men's restroom was noted to be missing soap. Owner stated they will put a soap dispenser in it.

General Comments:

Apart from the above noted violation, restrooms were noted to be clean and organized.

Cold holding units only hold alcohol.

Sinks in the bar were noted to have hot and cold water.

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:

Abel Simon - REHS

Agency Representative

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: SEQUOIA CLUB	BUSINESS PHONE: (559) 587-1400	RECORD ID#: PR0000197	DATE: December 21, 2015
FACILITY SITE ADDRESS: 118 N IRWIN ST	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ROBERT LEE	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	INSPECTOR: Susan Lee-Yang - 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:

Restrooms had hot water, soap and paper towels.

Facility is in satisfactory operating condition.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

RL

Received By:

Susan Lee-Yang - REHS

Agency Representative

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