



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: AVENAL NUTRITION CENTER	BUSINESS PHONE: (559) 386-5861	RECORD ID#: PR0003562	DATE: August 23, 2016
FACILITY SITE ADDRESS: 108 W KINGS ST	CITY: AVENAL	ZIP CODE: 93204	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: KINGS COUNTY COMMISSION ON AGING	CERTIFIED FOOD MANAGER: Annette M. Linarte	EXP DATE:	INSPECTOR: Vikram Manke

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 [HSC 114192]

Description/Corrective Action: The temperature of the the water supply at two compartment sinks was measured between 110-112 F. This temperature must be a minimum of 120 F.

Violation: IMPROPER FOOD HANDLING PRACTICES [HSC 113961 - 113973]

Description/Corrective Action: A bowl of ice cream was present in the freezer. Please discontinue this practice. Once food is partially consumed in the utensil, it shouldn't be returned to the freezer or refrigerator.

General Comments:

Hand wash station had soap and warm water supply. Refrigerator was measured at 41 F. This food facility receives food from Adventist Health Kitchen. Temperature of the food items are measured upon arrival and a record is maintained. The temperature records were verified during the inspection.

Please correct the above noted violations.

RESULTS OF EVALUATION: <input type="checkbox"/> PASS <input checked="" 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:

Vikram Manke

Agency Representative

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



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: AVENAL NUTRITION CENTER	BUSINESS PHONE: (559) 386-5861	RECORD ID#: PR0003562	DATE: September 29, 2015
FACILITY SITE ADDRESS: 108 W KINGS ST	CITY: AVENAL	ZIP CODE: 93204	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: KINGS COUNTY COMMISSION ON AGING	CERTIFIED FOOD HANDLER: Annette M. Linarte	EXP DATE:	INSPECTOR: Vikram Singh

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:

The hand wash stations had soap, paper towels, and warm water supply. Refrigerators were measured at satisfactory temperatures per the state law. Food is prepared at Adventist Health Center and deliver to this site. Upon delivery of food, the facility records the temperatures. The record were verified and found to be satisfactory.

Please fix the above noted violations.

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:

Annette M. Linarte

Vikram Singh

Received By:

Agency Representative

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



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/health/ehs

FOOD SAFETY EVALUATION REPORT

FACILITY NAME: AVENAL NUTRITION CENTER	BUSINESS PHONE: (559) 386-5861	RECORD ID#: PR0003562	DATE: January 09, 2015
FACILITY SITE ADDRESS: 108 W KINGS ST	CITY: AVENAL	ZIP CODE: 93204	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: KINGS COUNTY COMMISSION ON AGING	CERTIFIED FOOD HANDLER: Annette M. Linarte	EXP DATE:	INSPECTOR: ABEL SIMON

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: NO CURRENT FOOD HANDLER CARD CERTIFICATES FOR EMPLOYEES

Description/Corrective Action: Please renew certification before next inspection.

General Comments:

- Today's menu: pizza, fruit, veggies, and milk.
- Cold holding temperatures noted at 41° or below.
- All kitchen area well maintained and clean.
- Restrooms were fully stocked with hot water, soap, and paper towels.
- Temperature log up-to-date.
- Thank you.
- 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:

Quintus Luvants

ABEL SIMON

Received By: _____

Agency Representative _____

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