



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

<b>FACILITY NAME:</b> AUTO ISLAND CAR WASH	<b>BUSINESS PHONE:</b> (559) 589-9060	<b>RECORD ID#:</b> PR0006065	<b>DATE:</b> September 06, 2016
<b>FACILITY SITE ADDRESS:</b> 1697 W LACEY BLVD	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> DELIGHT CAR WASH LLC	<b>CERTIFIED FOOD MANAGER:</b> N/A	<b>EXP DATE:</b>	<b>INSPECTOR:</b> Yatee Patel - 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:

At the moment no foods and drinks served.

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:

Yatee Patel - REHS

Agency Representative

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



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FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> ARSENIO'S MEXICAN FOOD	<b>BUSINESS PHONE:</b> (559) 765-9070	<b>RECORD ID#:</b> PR0009334	<b>DATE:</b> July 14, 2015
<b>FACILITY SITE ADDRESS:</b> 1695 W LACEY BLVD	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> FRANCISCO SOLIS / LUCIA LOPEZ	<b>CERTIFIED FOOD HANDLER:</b> LUCIA LOPEZ	<b>EXP DATE:</b> 10/16/2018	<b>INSPECTOR:</b> Yatee Patel - 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 COLD HOLDING TEMPERATURE(S) [HSC 113996]

Description/Corrective Action: One deli unit where condiments are stored was observed at 51F. Please call to repair and lower to temperature of 41F or lower immediately - or move all PHF's to the reach in unit across the prep area.

General Comments:

- Walk in and freezer were observed organized.
  - 3 compartment sink was observed with bleach concentration of 100ppm.
  - Hand washing stations were fully stocked.
  - Over all facility was in good operating condition.
- Thank you

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:

*Francisco Solis*

Received By: \_\_\_\_\_

*Yatee Patel - REHS*

Agency Representative \_\_\_\_\_

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**FOOD SAFETY EVALUATION REPORT**

<b>FACILITY NAME:</b> AUTO ISLAND CAR WASH	<b>BUSINESS PHONE:</b> (559) 589-9060	<b>RECORD ID#:</b> PR0006065	<b>DATE:</b> June 24, 2014
<b>FACILITY SITE ADDRESS:</b> 1697 W LACEY BLVD	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> DELIGHT CAR WASH LLC	<b>CERTIFIED FOOD HANDLER:</b> N/A	<b>EXP DATE:</b>	<b>INSPECTOR:</b> 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:** IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

**Description/Corrective Action:** Observed kitchen room and map sink cluttered with unnecessary items.  
 Thorough organization needs to occur.  
 Repair/replace loose faucet on 3-compartment sink.

**Violation:** IMPROPER COLD HOLDING TEMPERATURE(S) [HSC 113996]

**Description/Corrective Action:** Small reach-in unit by cash register was noted above 41° F.  
 Lower thermostat and ensure unit maintains at least 41° F or below.

**Violation:** UNNECESSARY ITEMS AND LITTER (HSC 114257.1)

**Description/Corrective Action:** Observed a few unused/nonfunctioning equipment (refrigerators, ice machine) in the facility.  
 Any unused equipment must be removed from the facility.

**General Comments:**

Restrooms were stocked with hot water, soap, and paper towels.  
 Cold reach-in unit storing milk was noted satisfactory.  
 Correct today's noted violations immediately.

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

*Yelena Poscano*

Received By:

*Susan Lee-Yang - REHS*

Agency Representative

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