



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: BASKIN ROBBINS	BUSINESS PHONE: (559) 280-8595	RECORD ID#: PR0000542	DATE: September 20, 2016
FACILITY SITE ADDRESS: 533 N 11TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: PHILLIP ESLICK	CERTIFIED FOOD MANAGER: PHILLIP E ESLICK	EXP DATE: 7/1/2020	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: NO CURRENT CERTIFIED FOOD SAFETY PERSON ON STAFF [HSC 113947-113947.6]

Description/Corrective Action: One employee was observed to not have her food handler card on site. Please make sure to keep a copy on site at all times.

General Comments:

Hand wash sink was observed to be fully stocked with hot water, soap, and paper towels.

All cold holding units were noted to be below 41°F.

All dry storage items were above the floor six inches.

All sinks were observed to have hot and cold water.

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): N/A <input type="checkbox"/> Potential Food Safety All Star:
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Phillip E. Esllick

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: BASKIN ROBBINS	BUSINESS PHONE: (559) 280-8595	RECORD ID#: PR0000542	DATE: September 01, 2015
FACILITY SITE ADDRESS: 533 N 11TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: PHILLIP ESLICK	CERTIFIED FOOD HANDLER: PHILLIP E ESLICK	EXP DATE: 7/1/2020	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:

Hand wash station has hot water, soap and paper towels.

All cold holding units were noted below 41F.

Facility is organized and maintained.

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: _____

Susan Lee-Yang - REHS

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: BASKIN ROBBINS	BUSINESS PHONE: (559) 280-8595	RECORD ID#: PR0000542	DATE: February 11, 2014
FACILITY SITE ADDRESS: 533 N 11TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: PHILLIP ESLICK	CERTIFIED FOOD HANDLER: PHILLIP E ESLICK	EXP DATE: 4/7/2015	INSPECTOR: 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:

Overall facility was in good condition.
Sanitizer was 200 ppm of QAC.
Hand Washing Station was stocked.
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:

Yatee Patel - REHS

Received By:

Agency Representative

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