



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> CARL'S JR #227	<b>BUSINESS PHONE:</b> (559) 583-6124	<b>RECORD ID#:</b> PR0000618	<b>DATE:</b> August 12, 2016
<b>FACILITY SITE ADDRESS:</b> 840 LACEY BLVD	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> JEFF CASARETTO	<b>CERTIFIED FOOD MANAGER:</b> ROY WALTON	<b>EXP DATE:</b> 3/8/2021	<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 door gasket of reach-in freezer by the fryer worn out.  
Please replace gasket.

**General Comments:**

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

Restroom has hot water, soap and air hand dryer.

All cold holding units were noted at or below 41F.

QAC sanitizer in 3-compartment sink was noted at 200 ppm.

Observed temperature log up-to-date.

Observed good organization inside walk-in refrigerator.

**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:

Susan Lee-Yang - REHS

Agency Representative

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



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<b>FACILITY NAME:</b> CARL'S JR #227	<b>BUSINESS PHONE:</b> (559) 583-6124	<b>RECORD ID#:</b> PR0000618	<b>DATE:</b> February 26, 2016
<b>FACILITY SITE ADDRESS:</b> 840 LACEY BLVD	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> CARL'S JR. RESTAURANTS LLC	<b>CERTIFIED FOOD HANDLER:</b> ROY WALTON	<b>EXP DATE:</b> 3/14/2016	<b>INSPECTOR:</b> 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:** FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

**Description/Corrective Action:** Ice cream for milkshakes is pre-portioned in cups and left uncovered inside the freezer. Place lids over the cups to prevent anything from accidentally falling on the ice cream and to prevent freezer burns as noted in a couple of the cups.

**Violation:** IMPROPER MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

**Description/Corrective Action:** The hand washing station did not have hot water available. Hot water was available at other sinks. Operator requested service of sink at time of inspection. Repair as soon as possible to allow proper handwashing by employees.

**General Comments:**

Observed cold holding temperatures at or below 41F.  
Final cooking temperatures for hamburger patties ranged from 165 - 178F.

Please correct the noted violations and improve the overall sanitation of the facility.

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

Liliana Stransky - REHS

Agency Representative

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**FOOD SAFETY EVALUATION REPORT**

<b>FACILITY NAME:</b> CARL'S JR #227	<b>BUSINESS PHONE:</b> (559) 583-6124	<b>RECORD ID#:</b> PR0000618	<b>DATE:</b> August 04, 2015
<b>FACILITY SITE ADDRESS:</b> 840 LACEY BLVD	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> 1ST FOLLOW UP INSPECTION
<b>OWNER NAME:</b> CARL'S JR. RESTAURANTS LLC	<b>CERTIFIED FOOD HANDLER:</b> Maria T. Estrada Perez	<b>EXP DATE:</b> 2/23/2020	<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:** None Noted

**General Comments:**

Today's re-inspection revealed that the facility's hand wash station now has adequate hot water. Water was noted at 100F.

Please continue to monitor and ensure hand wash station always has hot water. Also focus on thorough cleanliness in the storage area and walk-in freezer.

Thank you for your cooperation!

<b>RESULTS OF EVALUATION:</b> <input checked="" type="checkbox"/> PASS <input 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> <u>      N/A      </u> <input type="checkbox"/> Potential Food Safety All Star:

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

*Susan Lee-Yang - REHS*

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

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