



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: COST LESS FOOD COMPANY	BUSINESS PHONE: (559) 583-7357	RECORD ID#: PR0000123	DATE: January 27, 2017
FACILITY SITE ADDRESS: 102 S 11TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: INITIAL COMPLAINT INSPECTION
OWNER NAME: DONALD E WAY	CERTIFIED FOOD MANAGER: MICHAEL J CHAVEZ	EXP DATE: 2/2/2017	INSPECTOR: Luis Flores - 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:

CO0008788

A complaint was received by our Department on Jan. 25, 2017 alleging the handicap stall's commode in the women's restroom leaks at the base of the unit. The condition was reported as being an ongoing situation without corrective measures being undertaken. As a consequence of the complaint, an onsite visit today was performed to evaluate this situation. The following observations and determination were made:

The stall area was noted with appeared to be water accumulation as opposed to wastewater. Flooring was observed worn away near the vicinity of the drain. The onsite manager, Aldo Barba, reported restrooms are hosed down as part of the general cleaning process. This is likely the source of the observed puddling.

The following corrective measures should be undertaken:

1. Install a new toilet wax ring and rechalk around the toilet base.
2. Repair the deteriorated area around the floor drain to allow for proper sloping and drainage so that water cannot puddle.
3. Have the repair work completed ASAP but no later than 7 days from today.

Contact me with an update upon completion of corrective measures.

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

Received By: _____

Luis Flores - 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: COST LESS FOOD COMPANY	BUSINESS PHONE: Not Specified	RECORD ID#: PR0000123	DATE: October 13, 2016
FACILITY SITE ADDRESS: 102 S 11TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: DONALD E WAY	CERTIFIED FOOD MANAGER: MICHAEL J CHAVEZ	EXP DATE: 2/2/2017	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: IMPROPER CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]

Description/Corrective Action: The meat area sanitizer was at 0 ppm of QAT or CI solution for sanitizing the trays of the meat. Operator did not have sanitizing stripes available on site during the inspection.

Violation: IMPROPER CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]

Description/Corrective Action: Sanitizer was not available in the bakery area. Operator uses Alcohol liquid solution to wipe surfaces. Please use any of the approved sanitizers to sanitize the surfaces (Chlorine - bleach, QAT or Iodine) Bleach was available during the inspection.

General Comments:

Cold holding units were satisfactory.

During today's inspection, operators were rotating the food items.

Back storage was satisfactory. Daily organization and disposal of recycled materials should be done frequently to avoid large accumulation on site.

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

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: COST LESS FOOD COMPANY	BUSINESS PHONE: Not Specified	RECORD ID#: PR0000123	DATE: April 08, 2016
FACILITY SITE ADDRESS: 102 S 11TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: 1ST FOLLOW UP INSPECTION
OWNER NAME: DONALD E WAY	CERTIFIED FOOD HANDLER: MICHAEL J CHAVEZ	EXP DATE: 2/2/2017	INSPECTOR: 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: None Noted

General Comments:

An inspection of the warming unit for the rotisserie chicken was done today. The operator indicated the heating element for the warmer was replaced to bring the temperature to 135F. The unit was noted clean and empty. It's kept turned off until the chicken is finished cooking around noon time.

Please monitor the temperature by placing a thermometer in the unit.

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: _____

Liliana Stransky - REHS

Agency Representative

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