County of Kings - Department of Public Health
Environmental Health Serivces 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:	BUSINESS PHONE:	RECORD ID#:	DATE:
GRANGEVILLE LIQUOR	(818) 800-7089	PR0009240	October 08, 2015
FACILITY SITE ADDRESS:	**CITY:**	**ZIP CODE:**	**INSPECTION TYPE:**
1705 N 11TH AVE	HANFORD	93230	ROUTINE INSPECTION
OWNER NAME:	**CERTIFIED FOOD HANDLER:**	**EXP DATE:**	**INSPECTOR:**
ABDULLAH YOUNAN	Not Specified		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 one shatterproof cover missing in walk-in refrigerator.
Please replace missing cover.

General Comments:

Restroom has hot water, soap and paper towels.

All cold holding units were noted satisfactory.

Observed all food products stored off the ground.

Please correct today's noted violation.

RESULTS OF EVALUATION: [X] **PASS** [ ] **NEEDS IMPROVEMENT** [ ] **FAIL**

Reinspection Required: **Yes:** [ ] **No:** [X]

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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FOOD SAFETY EVALUATION REPORT

FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:
GRANGEVILLE LIQUOR	(818) 800-7089	PR0009240	November 04, 2014
FACILITY SITE ADDRESS:	**CITY:**	**ZIP CODE:**	**INSPECTION TYPE:**
1705 N 11TH AVE	HANFORD	93230	ROUTINE INSPECTION
OWNER NAME:	**CERTIFIED FOOD HANDLER:**	**EXP DATE:**	**INSPECTOR:**
ABDULLAH YOUNAN	Not Specified		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:

Facility was observed in very good operation.

RESULTS OF EVALUATION: [X] **PASS** [ ] **NEEDS IMPROVEMENT** [ ] **FAIL**

Reinspection Required: **Yes:** [ ] **No:** [X]

Reinspection Date (on or after): **N/A**

[ ] Potential Food Safety All Star:

Received By:

Luis Flores - REHS
Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:
GRANGEVILLE LIQUOR	(559) 217-1771Ext. CELL	PR0009102	September 04, 2013
FACILITY SITE ADDRESS:	**CITY:**	**ZIP CODE:**	**INSPECTION TYPE:**
1705 N 11TH AVE	HANFORD	93230	ROUTINE INSPECTION
OWNER NAME:	**CERTIFIED FOOD HANDLER:**	**EXP DATE:**	**INSPECTOR:**
PAUL SINGH SANDHE	N/A		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: FACILITY DOES NOT HAVE A VALID PERMIT [HSC 114381 (a)]

Description/Corrective Action: This facility is now under new ownership as of Sept. 5, 2013 and the new owner's have not filed a food vending permit application with this Department. A permit application was provided today and must be filed and paid for by no later than the morning of Monday, Sept. 9, 2013.

Violation: OTHER PERMIT VIOLATION

Description/Corrective Action: This facility is not provided with a three compartment wash sink. The facility has a dual coffee unit installed in the customer self-service area. A soda fountain is also installed in the convenience store. As agreed upon, coffee will no longer be served and the unit removed from display. Since the soda fountain will remain, the facility owner is hereby required to implement an approved manual equipment washing program via the use of three pans for required washing for soap washing, clear water rinsing, and final sanitizing. it is recommended to utilize ammonium chloride at a required concentration level of 200 parts per million (ppm) to achieve approved washing.

Violation: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: General shelving within the store require dust cleaning.

General Comments:

Please note that a re-inspection will be performed in 5-7 days to verify compliance with the identified violation corrections.

RESULTS OF EVALUATION: ☐ PASS ☒ NEEDS IMPROVEMENT ☐ FAIL

Reinspection Required: Yes: ☒ No: ☐

Reinspection Date (on or after): 9/11/2013

☐ Potential Food Safety All Star:

Received By:

Luis Flores - REHS
Agency Representative

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