



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: JOHNNY MART | BUSINESS PHONE: (559) 582-2626 | RECORD ID#: PR0007454 | DATE: February 09, 2016 |
| FACILITY SITE ADDRESS: 12191 W LACEY BLVD | CITY: HANFORD | ZIP CODE: 93230 | INSPECTION TYPE: ROUTINE INSPECTION |
| OWNER NAME: CARLETTE MYERS | CERTIFIED FOOD HANDLER: N/A | EXP DATE: | INSPECTOR: Government Intern |

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 is well maintained and limited in food sales.

Restroom has hot water, paper towels, and soap.

General floor area is organized and all items are above the floor 6 inches.

This inspection was conducted by government intern Evelyn Elizalde.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Government Intern

Agency Representative

Received By:

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



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| | | | |
|---|--|---------------------------------|---|
| FACILITY NAME: JOHNNY MART | BUSINESS PHONE: (559) 582-2626 | RECORD ID#: PR0007454 | DATE: March 30, 2015 |
| FACILITY SITE ADDRESS: 12191 W LACEY BLVD | CITY: HANFORD | ZIP CODE: 93230 | INSPECTION TYPE: ROUTINE INSPECTION |
| OWNER NAME: CARLETTE MYERS | CERTIFIED FOOD HANDLER: N/A | EXP DATE: | INSPECTOR: ABEL SIMON |

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 is very well maintained and limited in food sales.

General floor area is organized and all items are above floor 6 inches.

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:

ABEL SIMON

Agency Representative

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FOOD SAFETY EVALUATION REPORT

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|---|--|---------------------------------|---|
| FACILITY NAME: JOHNNY MART | BUSINESS PHONE: (559) 582-2626 | RECORD ID#: PR0007454 | DATE: September 26, 2014 |
| FACILITY SITE ADDRESS: 12191 W LACEY BLVD | CITY: HANFORD | ZIP CODE: 93230 | INSPECTION TYPE: ROUTINE INSPECTION |
| OWNER NAME: CARLETTE MYERS | CERTIFIED FOOD HANDLER: N/A | EXP DATE: | INSPECTOR: Government Intern |

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 in excellent condition.
All items were organized and clean.
Thank you.
This facility was inspected by government Abel Simon.

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|---|---|
| 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: |
|---|---|

Judy Shaaloor

Received By:

Government Intern

Agency Representative

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