



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: RAVEN BRAND PRODUCTS & DELI	BUSINESS PHONE: (559) 707-1046	RECORD ID#: PR0009107	DATE: October 19, 2016
FACILITY SITE ADDRESS: 319 N IRWIN ST	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: WILLIAM & MARLENE RAVEN	CERTIFIED FOOD MANAGER: IZZY HERNANDEZ	EXP DATE: 10/29/2018	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: IMPROPER COLD HOLDING TEMPERATURE(S) [HSC 113996]

Description/Corrective Action: Ambient temperature of reach-in unit next to grill was noted above 41F.
 Lower thermostat and monitor unit. Ensure ambient temperature of unit is at least 41F and below.

General Comments:

- Hand wash station has hot water, soap and paper towels.
- Other than noted, cold holding units were noted below 41F.
- Chili, turkey and beef tri-tip in hot holding units were noted above 135F.
- Facility is maintained.

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



County of Kings - Department of Public Health

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: RAVEN BRAND PRODUCTS & DELI	BUSINESS PHONE: (559) 707-1046	RECORD ID#: PR0009107	DATE: April 19, 2016
FACILITY SITE ADDRESS: 319 N IRWIN ST	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: WILLIAM & MARLENE RAVEN	CERTIFIED FOOD HANDLER: IZZY HERNANDEZ	EXP DATE: 10/29/2018	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: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: Observed chemical spray stored above bagged got dog buns. Ensure chemicals are stored below and away from food products.

Violation: REQUIREMENT NOT MET FOR CALIFORNIA FOOD HANDLER CARD LAW

Description/Corrective Action: Ensure all workers have valid food handler cards on-site.

General Comments:

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

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

Observed facility in satisfactory operating condition.

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: 1337 [Signature]

Susan Lee-Yang - REHS
Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: RAVEN BRAND PRODUCTS & DELI	BUSINESS PHONE: (559) 707-1046	RECORD ID#: PR0009107	DATE: September 05, 2014
FACILITY SITE ADDRESS: 319 N IRWIN ST	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: WILLIAM & MARLENE RAVEN	CERTIFIED FOOD HANDLER: Not Specified	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: IMPROPER COLD HOLDING TEMPERATURE(S) [HSC 113996]

Description/Corrective Action: Temperature in cold holding was observed to be 44° F. Please make sure to keep at 41° F or lower.

General Comments:

Hot holding temperatures were at 135° F or higher.
 Hand wash station was properly stocked with soap, towels, and hot water.
 Facility is clean and well maintained.
 Thank you.
 This facility was inspected by government intern Abel Simon.

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:

Eric Leland

Received By: _____

Government Intern

Agency Representative _____

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