



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: THE SALVATION ARMY	BUSINESS PHONE: (559) 582-4434	RECORD ID#: PR0000489	DATE: December 05, 2016
FACILITY SITE ADDRESS: 380 E IVY	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: SALVATION ARMY	CERTIFIED FOOD MANAGER: Stephanie Gomez	EXP DATE: 7/31/2020	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 MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

Description/Corrective Action: No sanitizer was dispensing during today's inspection. Operator will call the company to re-check. Facility should have the stripes available and tested daily.

General Comments:

Remember to separate meats from ready to eat foods in the reach-ins.

Cold holding units were satisfactory.

Only break fast is served.

Thank you

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:

Yatee Patel - REHS

Agency Representative

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



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: SALVATION ARMY	BUSINESS PHONE: (559) 582-4434	RECORD ID#: PR0000489	DATE: June 14, 2016
FACILITY SITE ADDRESS: 380 E IVY	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: SALVATION ARMY	CERTIFIED FOOD MANAGER: ORPHA MOODY	EXP DATE: 5/22/2017	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: SPOILED OR ADULTERATED FOOD PRODUCTS DISPLAYED [HSC 113980 & 114055]

Description/Corrective Action: Observed several canned food items severely dented. Please remove dented and/or bloated cans from shelves.

Violation: IMPROPER COLD HOLDING TEMPERATURE(S) [HSC 113996]

Description/Corrective Action: Ambient temperature of walk-in refrigerator was noted above 41F. Lower thermostat and ensure temperature is at least 41F or below.

General Comments:

- Hand wash station has hot water, soap and paper towels.
- Chlorine sanitizer for dishwasher was noted at 50 ppm.
- Other than noted, cold holding units were noted below 41F.
- Observed food products stored off the ground.
- Please correct today's noted violations to prevent further enforcement.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

[Handwritten Signature]

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

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: SALVATION ARMY	BUSINESS PHONE: (559) 582-4434	RECORD ID#: PR0000489	DATE: December 21, 2015
FACILITY SITE ADDRESS: 380 E IVY	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: SALVATION ARMY	CERTIFIED FOOD HANDLER: ORPHA MOODY	EXP DATE: 5/22/2017	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 MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

Description/Corrective Action: Soap dispenser at hand wash station did not have any soap.
Ensure dispenser is stocked at all times.

Motion sensor paper towel dispenser at hand wash station was not operating.
Ensure paper towel dispenser is operating.

General Comments:

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

Chlorine sanitizer for dishwasher was noted at 100 ppm.

Facility is in satisfactory operating condition.

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