



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: STOP ZONE	BUSINESS PHONE: (559) 246-8934	RECORD ID#: PR0000157	DATE: September 23, 2016
FACILITY SITE ADDRESS: 10915 HANFORD/ARMONA RD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: VERN GREWAL	CERTIFIED FOOD MANAGER: N/A	EXP DATE:	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: IMPROPER USE OR STORAGE OF TOXIC MATERIALS [HSC 114254-114254.3]

Description/Corrective Action: Raid pesticide aerosol cans were on display on a top shelf over pinto bean bags in the general store area. The store clerk removed the cans from the storage location for proper storage and/or display.

General Comments:

Overall, the facility was observed in satisfactory operational condition.
All cold food temperatures monitored were below 41 F.

RESULTS OF EVALUATION: <input type="checkbox"/> PASS <input checked="" type="checkbox"/> NEEDS IMPROVEMENT <input type="checkbox"/> FAIL	Reinspection Required: Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/> Reinspection Date (on or after): N/A <input type="checkbox"/> Potential Food Safety All Star:
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Shirley S...

Luis Flores - REHS

Received By:

Agency Representative

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



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OWNER NAME: VERN GREWAL	CERTIFIED FOOD MANAGER: N/A	EXP DATE:	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: IMPROPER USE OR STORAGE OF TOXIC MATERIALS [HSC 114254-114254.3]

Description/Corrective Action: Raid pesticide aerosal cans were on display on a top shelf over pinto bean bags in the general store area. The store clerk removed the cans from the storage location for proper storage and/or display.

General Comments:

Overall, the facility was observed in satisfactory operational condition. All cold food temperatures monitored were below 41 F.

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:

Luis Flores - REHS

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: STOP ZONE	BUSINESS PHONE: (559) 246-8934	RECORD ID#: PR0000157	DATE: August 03, 2015
FACILITY SITE ADDRESS: 10915 HANFORD/ARMONA RD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: VERN GREWAL	CERTIFIED FOOD HANDLER: N/A	EXP DATE:	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 CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]

Description/Corrective Action: Observed floor sinks with trash accumulation, soda nozzles with mildew accumulation and canned food items with dust accumulation.
 Ensure floor sinks, soda nozzles and food items are cleaned and dusted regularly to prevent accumulation.

General Comments:

All cold holding units were noted at or below 41F.
 Restroom had hot water, soap and paper towels.
 Please correct today's noted violations to prevent further enforcement.

RESULTS OF EVALUATION: <input type="checkbox"/> PASS <input checked="" 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: _____

Susan Lee-Yang - REHS

 Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: STOP ZONE	BUSINESS PHONE: (559) 246-8934	RECORD ID#: PR0000157	DATE: January 13, 2015
FACILITY SITE ADDRESS: 10915 HANFORD/ARMONA RD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: VERN GREWAL	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:

Cold holding temperatures noted at 41°F or below.
This facility is limited to prepackaged food sales.
Restrooms were fully stocked with hot water, soap, and paper towels.
Thank you.

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): N/A <input type="checkbox"/> Potential Food Safety All Star:
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ABEL SIMON

Received By:

Agency Representative

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