



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: FASTRIP FOOD STORE #654	BUSINESS PHONE: (559) 925-1033	RECORD ID#: PR0005281	DATE: November 16, 2016
FACILITY SITE ADDRESS: 775 N LEMOORE AVE	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: FASTRIP FOOD STORE, INC.	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: Abel Simon - 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: There was lacking hot water observed for all the sinks in the facility. Store manager observed that the pilot light was off for the water heater. This was turned on during the inspection and the water in three compartment sink was observed to be warming up. Please make sure to routinely check that there is hot water available in all sinks.

General Comments:

All cold holding temperatures were noted tot be below 41°F.

All dry foods were observed to be above the floor six inches.

General floor sales area was observed to be well maintained and organized.

Please correct the above noted issue before the next routine inspection.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Abel Simon - REHS

Received By: _____

Agency Representative _____

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: FASTRIP FOOD STORE #654	BUSINESS PHONE: (559) 925-1033	RECORD ID#: PR0005281	DATE: May 12, 2016
FACILITY SITE ADDRESS: 775 N LEMOORE AVE	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: FASTRIP FOOD STORE, INC.	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: Veronica Ochoa -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:

The facility was equipped with hot water.
Hand wash stations were properly stocked.
Cold holding units storing PHF's measured at 37F or below.
Please make sure to clean the floor sink where the water from the three compartment sink drains.

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:

Veronica Ochoa -REHS

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: FASTRIP FOOD STORE #654	BUSINESS PHONE: (559) 925-1033	RECORD ID#: PR0005281	DATE: December 03, 2015
FACILITY SITE ADDRESS: 775 N LEMOORE AVE	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: FASTRIP FOOD STORE, INC.	CERTIFIED FOOD HANDLER: Not Specified	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 unit noted to below 41°F.

General floor sales are observed to be well maintained and organized.

Restroom was fully stocked.

Walk-in fridge was observed to be organized with everything above the floor six 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:

Ben Stivers

Received By:

ABEL SIMON

Agency Representative

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