



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/health/ehs

FOOD SAFETY EVALUATION REPORT

FACILITY NAME: LOIS' DELECTABLES	BUSINESS PHONE: (559) 924-2318	RECORD ID#: PR0006189	DATE: April 23, 2014
FACILITY SITE ADDRESS: 7305 19 1/2 AVE	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: LOIS ROSS	CERTIFIED FOOD HANDLER: LOIS ROSS	EXP DATE: 1/26/2015	INSPECTOR: Veronica Santa Cruz-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:

This operator utilizes Central Valley Community Church as a commissary to bake items that will be sold at the Farmers Market.

Please make sure to label all baked items with the item's name, ingredients in descending order, as well as the business information.

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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Lois Ross

Received By:

Veronica Santa Cruz-REHS

Agency Representative

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: LOIS' DELECTABLES	BUSINESS PHONE: (559) 924-2318	RECORD ID#: PR0006189	DATE: April 29, 2013
FACILITY SITE ADDRESS: 7305 19 1/2 AVE	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: LOIS ROSS	CERTIFIED FOOD HANDLER: LOIS ROSS	EXP DATE: 1/26/2015	INSPECTOR: Veronica Santa Cruz-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:

Operator utilizes the Central Valley Community Church as a commissary. Operator sells baked goods that are baked at the commissary and are sold at the Thursday night Farmers' Market. Please make sure all pre-packaged goods are properly labeled with business name, product name, and ingredients in descending order.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: LOIS' DELECTABLES	BUSINESS PHONE: (559) 924-2318	RECORD ID#: PR0006189	DATE: May 09, 2012
FACILITY SITE ADDRESS: 7305 19 1/2 AVE	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: LOIS ROSS	CERTIFIED FOOD HANDLER: LOIS ROSS	EXP DATE: 1/26/2015	INSPECTOR: Veronica Santa Cruz-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:

Operator currently uses Centrally Valley Community Church as her commissary. Currently, operator bakes pies, brownies, cookies, etc. to sell at the Thursday Night Farmers' Market. Operator was observed baking pies and utilizing appropriate food handling gloves.

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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