



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: TRINITY JUSTO BAKERY & DELI	BUSINESS PHONE: (559) 924-4601	RECORD ID#: PR0006300	DATE: January 20, 2017
FACILITY SITE ADDRESS: 245 E ST	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ISABELO & ELSA JUSTO	CERTIFIED FOOD MANAGER: LILIBETH GRANDE	EXP DATE: 6/11/2020	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:

Hand wash stations and restrooms were stocked with soap, paper towels, and hot water.
Cold holding units measured at or below 41F.
Food items on the steam table measured at 150F.
All prepackaged food items were observed properly labeled.

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

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: TRINITY JUSTO BAKERY & DELI	BUSINESS PHONE: (559) 924-4601	RECORD ID#: PR0006300	DATE: July 05, 2016
FACILITY SITE ADDRESS: 245 E ST	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ISABELO & ELSA JUSTO	CERTIFIED FOOD MANAGER: LILIBETH GRANDE	EXP DATE: 6/11/2020	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: IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

Description/Corrective Action: All of the facility's hand wash stations had paper towels but were not in their proper dispensers. Please make sure to install paper towels that fit the existing dispensers or change out the dispensers to fit the paper towels the facility is currently using. Also, please make sure to mount a paper towel dispenser for the employee restroom.

Please make sure to routinely have the hood baffles cleaned to eliminate grease build-up.

Banana leaves with rice were observed on a the facility's front counter in ambient temperature. The owner indicated that some customers enjoy this food item cold while other enjoy it hot. As a result, those that are intended to be served hot should be placed on the steam table while the others should be kept in a cold holding unit. Please do not keep this food item on the facility's counter.

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

Description/Corrective Action: Food items on the steam table measured between 126-127F. The heat on the steam table was increased and all food items were covered with stainless steel lids during the inspection.

General Comments:

Hand wash stations were stocked with soap, paper towels, and hot water.
Cold holding units measured at or below 41F.
Please work on correcting the noted violations.

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: TRINITY JUSTO BAKERY & DELI	BUSINESS PHONE: (559) 924-4601	RECORD ID#: PR0006300	DATE: January 19, 2016
FACILITY SITE ADDRESS: 245 E ST	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ISABELO & ELSA JUSTO	CERTIFIED FOOD HANDLER: LILIBETH GRANDE	EXP DATE: 6/11/2020	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 MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

Description/Corrective Action: Observed paper towels to not be in the dispenser. Please obtain the correct dispenser for the paper towels.

Violation: IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

Description/Corrective Action: Observed faucet nozzle missing from three compartment sink. There is another nozzle that can be used in lieu of missing nozzle. Please repair/replace missing nozzle before next routine inspection.

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

Description/Corrective Action: Cold holding unit located in front of facility was noted at 48°F. Items in unit were moved to reach in refrigerator near food preparation area.

Violation: VERMIN INFESTATION [HSC 114259.1]

Description/Corrective Action: Observed one dead cockroach in the back storage room next to the employee restroom. Please make sure certified pest control performs service at this facility as needed. This storage area was noted to be cluttered. Please make sure to keep walk way area clear to prevent harborage of pests.

General Comments:

All foods in hot holding steam table area were noted above 135°F.

Please correct the above noted violations before the next inspection.

Thank you. This inspection was conducted by government intern Evelyn Elizalde.

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