



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

Table with 4 columns: FACILITY NAME, BUSINESS PHONE, RECORD ID#, DATE, FACILITY SITE ADDRESS, CITY, ZIP CODE, INSPECTION TYPE, OWNER NAME, CERTIFIED FOOD MANAGER, EXP DATE, INSPECTOR.

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: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: Some containers in the reach-in refrigerator and two door prep refrigerator did not have proper covering to prevent against food contamination. Please provide covers at these containers.

Violation: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: One overhead lighting unit in the kitchen area did not have a protective cover. Light bulb in the outside walk-in refrigerator did not have a protective cover. Please install protective cover on both these lighting units to prevent food contamination from accidental breakage of bulb.

General Comments:

Hand wash station had soap, paper towels, and hot water supply. Items in the hot holding unit were measured above 135 F. Restroom was observed in good condition.

Reach-in refrigerator and prep table refrigerator were measured slightly over 41 F. On notification, the operator decreased the temperature of this unit.

Please correct the above noted violations.

RESULTS OF EVALUATION: [ ] PASS [X] NEEDS IMPROVEMENT [ ] FAIL

Reinspection Required: Yes: [ ] No: [X]

Reinspection Date (on or after): N/A

[ ] Potential Food Safety All Star:

Handwritten signature in blue ink.

Received By:

Vikram Manke

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

Table with 4 columns: FACILITY NAME, BUSINESS PHONE, RECORD ID#, DATE, FACILITY SITE ADDRESS, CITY, ZIP CODE, INSPECTION TYPE, OWNER NAME, CERTIFIED FOOD HANDLER, EXP DATE, INSPECTOR.

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 FOOD HANDLING PRACTICES [HSC 113961 - 113973]

Description/Corrective Action: Employees did not clean their hands at appropriate times. One food operator handled money with bare hands and then proceeded to handle food items without washing hands.

Violation: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: Many containers in the refrigerator did not have any covers to protect the contained items from contamination. These items also included raw meats. Additionally, food items were not stored in proper order.

General Comments:

Hand wash station had soap, paper towels, and warm water supply. The temperature of cold food items in the refrigerator and prep table were measured under 41 F.

RESULTS OF EVALUATION: [ ] PASS [X] NEEDS IMPROVEMENT [ ] FAIL. Reinspection Required: Yes: [ ] No: [X]. Reinspection Date (on or after): N/A. [ ] Potential Food Safety All Star.

Signature: Santigo Poma

Signature: Vikram Singh

Received By:

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

<b>FACILITY NAME:</b> TACOS Y TORTAS CHALIOS #2	<b>BUSINESS PHONE:</b> (559) 386-9010	<b>RECORD ID#:</b> PR0009681	<b>DATE:</b> July 13, 2015
<b>FACILITY SITE ADDRESS:</b> 836 SKYLINE BLVD	<b>CITY:</b> AVENAL	<b>ZIP CODE:</b> 93204	<b>INSPECTION TYPE:</b> 1ST FOLLOW UP INSPECTION
<b>OWNER NAME:</b> ROSALIO CARILLO ZUNIGA	<b>CERTIFIED FOOD HANDLER:</b> LEANOR MARTINEZ	<b>EXP DATE:</b> 4/26/2017	<b>INSPECTOR:</b> Vikram Singh

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:** FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

**Description/Corrective Action:** Few containers in the refrigerators were missing lids. Please provide lids on all the containers to avoid possible contamination.

**General Comments:**

This re-inspection was conducted to confirm compliance with the violations issued on May 26, 2015.

The soda nozzles were clean and no mildew was present. The food items in the hot holding unit were measured at 135 F or above. The kitchen floor was still slippery. Please clean thoroughly with heavy duty degreaser to fix this issue.

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

*LUPITA Meza*

*Vikram Singh*

Received By:

Agency Representative

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