



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

<b>FACILITY NAME:</b> CORCORAN EMERGENCY AID	<b>BUSINESS PHONE:</b> (559) 992-2272	<b>RECORD ID#:</b> PR0005238	<b>DATE:</b> February 03, 2010
<b>FACILITY SITE ADDRESS:</b> 2121 W WHITLEY BLVD	<b>CITY:</b> CORCORAN	<b>ZIP CODE:</b> 93212	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> CORCORAN EMERGENCY AID	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> Lee Johnson - 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 non-profit food distribution center provides free packaged food to approximately 500 families per month.

All cold temperatures were satisfactory today. No hot holding is occurring or permitted. Temperatures are logged regularly.

The facility is clean and well organized.

Thank you, and keep up the good work.

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:

Lee Johnson - REHS

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/health/ehs

**FOOD SAFETY EVALUATION REPORT**

<b>FACILITY NAME:</b> CORCORAN EMERGENCY AID	<b>BUSINESS PHONE:</b> (209) 992-2272	<b>RECORD ID#:</b> PR0005238	<b>DATE:</b> September 24, 2008
<b>FACILITY SITE ADDRESS:</b> 2121 W WHITLEY BLVD	<b>CITY:</b> CORCORAN	<b>ZIP CODE:</b> 93212	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> CORCORAN EMERGENCY AID	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> Lee Johnson

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:**

All cold temperatures were appropriate. Thermometers are present. Dry goods are intact and stored appropriately. Food is provided by the Community Food Bank of Fresno. The facility is clean and well organized. 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:

Received By:

*Mailed to operator*

*Lee Johnson*  
Environmental Health Specialist

**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/health/ehs

### FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> CORCORAN EMERGENCY AID	<b>BUSINESS PHONE:</b> (209) 992-2272	<b>RECORD ID#:</b> PR0005238	<b>DATE:</b> August 09, 2007
<b>FACILITY SITE ADDRESS:</b> 2121 W WHITLEY BLVD	<b>CITY:</b> CORCORAN	<b>ZIP CODE:</b> 93212	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> CORCORAN EMERGENCY AID	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> Lee Johnson

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 COLD HOLDING TEMPERATURE(S) [HSC 113996]


**Description/Corrective Action:** East refrigerator measured 46 F. Please adjust to keep all food 41F or less.

**General Comments:**

Free distribution of packaged goods to the community. Please check all canned goods and discard any that are severely dented, dented on the seams, swollen, or missing labels.

Please provide our office with 3 copies of plans for walk-in refrigerators, sinks and restrooms for planned new building prior to construction. Thank you.

<b>RESULTS OF EVALUATION:</b> <input checked="" type="checkbox"/> PASS <input 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> _____ N/A <input type="checkbox"/> Potential Food Safety All Star:

Signature: 

*Lee Johnson*  
Environmental Health Officer

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