



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> FULL STOP AND SAVE	<b>BUSINESS PHONE:</b> (559) 992-9156	<b>RECORD ID#:</b> PR0000250	<b>DATE:</b> September 16, 2010
<b>FACILITY SITE ADDRESS:</b> 1301 WHITLEY AVE	<b>CITY:</b> CORCORAN	<b>ZIP CODE:</b> 93212	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> RGR FARISHTA LLC	<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:** OTHER PERMIT VIOLATION

**Description/Corrective Action:** Please secure CO2 tanks with chain to prevent tip over.

**Violation:** IMPROPER MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

**Description/Corrective Action:** Paper towels were provided to both the restroom & the 2 compartment sink during inspection.

**General Comments:**

All cold temperatures checked today were satisfactory. No hot holding is occurring.

The facility is generally clean and well maintained. 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:

*Rosa Casamilla*

Received By:

*Lee Johnson - REHS*

Agency Representative

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



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<b>FACILITY NAME:</b> FULL STOP AND SHOP	<b>BUSINESS PHONE:</b> (559) 992-9156	<b>RECORD ID#:</b> PR0000250	<b>DATE:</b> March 08, 2010
<b>FACILITY SITE ADDRESS:</b> 1301 WHITLEY AVE	<b>CITY:</b> CORCORAN	<b>ZIP CODE:</b> 93212	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> TUKUE TEFAGABIR TEDROS TESFAZ	<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:** IMPROPER COLD HOLDING TEMPERATURE(S) [HSC 113996]

**Description/Corrective Action:** Please adjust walk in temperature to maintain 41F or less at all times. Temperature measured 45F during inspection.

**Violation:** IMPROPER MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

**Description/Corrective Action:** Please provide paper towels to both the two compartment sink and to the restroom sink. None available at either sink.

**General Comments:**

Store is generally clean and well maintained.

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:

*T. Curbis*

Received By:

*Lee Johnson - REHS*

Agency Representative

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<b>FACILITY NAME:</b> FULL STOP AND SHOP	<b>BUSINESS PHONE:</b> (559) 992-9156	<b>RECORD ID#:</b> PR0000250	<b>DATE:</b> September 28, 2009
<b>FACILITY SITE ADDRESS:</b> 1301 WHITLEY AVE	<b>CITY:</b> CORCORAN	<b>ZIP CODE:</b> 93212	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> TUKUE TEFAGABIR TEDROS TESFAZ	<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: IMPROPER CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]

Description/Corrective Action: Please clean soda dispenser nozzles to remove debris on a regular basis.

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

Description/Corrective Action: The walk-in refrigerator measured 45F. Please adjust to maintain 41F or less at all times.

General Comments:

No hot holding is occurring. Hand wash sink is fully stocked. 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:

Lee Johnson - REHS

Received By:

Agency Representative

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