



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: ORANGE AVENUE GROCERY	BUSINESS PHONE: (559) 992-5708	RECORD ID#: PR0000273	DATE: January 24, 2012
FACILITY SITE ADDRESS: 1400 ORANGE AVE	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: AAISH AHMED/JAMAL AHMED	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	INSPECTOR: Troy Hommerding-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: Soda nozzles were noted with mildew build up, Please clean. The operator stated he is going to replace the nozzles with new ones.

General Comments:

General store area is in satisfactory condition.

Walkin refrigeration unit where milk and other perishable items are held was measured at 41° F.

Employee restroom was noted stocked. Hand wash sink was noted with Hot water, soap, and paper towels.

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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Handwritten signature

Received By:

Troy Hommerding-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: ORANGE AVENUE GROCERY	BUSINESS PHONE: (559) 992-5708	RECORD ID#: PR0000273	DATE: June 13, 2011
FACILITY SITE ADDRESS: 1400 ORANGE AVE	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: AAISH AHMED/JAMAL AHMED	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	INSPECTOR: Troy Hommerding-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 EXCLUSION OF VERMIN OR ANIMALS [HSC 114259-114259.3]

Description/Corrective Action: please do not use poison pellets for rodent control inside the facility. Please use glue boards inside the store.

General Comments:

Employee restroom and handwash sink were stocked today.

General store area is in satisfactory condition.

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): <u> N/A </u> <input type="checkbox"/> Potential Food Safety All Star:

[Handwritten Signature]

Troy Hommerding-REHS

Received By: _____

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: ORANGE AVENUE GROCERY	BUSINESS PHONE: (559) 992-5708	RECORD ID#: PR0000273	DATE: September 27, 2010
FACILITY SITE ADDRESS: 1400 ORANGE AVE	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: AAISH AHMED/JAMAL AHMED	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	INSPECTOR: 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 MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

Description/Corrective Action: The soap dispenser at the sink was not functional. A bottle of hand soap was provided by the operator during the inspection.

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

Description/Corrective Action: The store is in need of general cleaning to remove spider webs. Also please clean the area adjacent to the front counter, and the floor of the walk in to remove boxes and debris.

General Comments:

No hot holding is occurring or permitted at this facility. The walk in measured 37F (good).

Thank you.

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

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Lee Johnson - REHS

Received By: _____

Agency Representative

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