



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: RANCHITO MARKET	BUSINESS PHONE: (559) 992-3861	RECORD ID#: PR0000424	DATE: May 09, 2008
FACILITY SITE ADDRESS: 2749 WHITLEY AVE	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ABDULLA Q AHMED	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	INSPECTOR: Troy Hommerding

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: Rodent droppings were once again notes under the soda machine. Also pellet type Rodent bait was noted. Please remove pellet style rodent bait and replace with sticky traps.

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

Description/Corrective Action: Dust was once again noted covering most of the food items on the shelves, please clean.

Violation: RESTROOM FACILITIES NOT MAINTAINED [HSC 114250 & 114276]

Description/Corrective Action: Remove "Bar" type soap in the restroom. Please replace with liquid hand soap from a pump type dispenser.

General Comments:

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

FADH6 MUNNIR

Signature: _____

Troy Hommerding

Environmental Health Officer

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: RANCHITO MARKET	BUSINESS PHONE: (559) 992-3861	RECORD ID#: PR0000424	DATE: August 28, 2007
FACILITY SITE ADDRESS: 2749 WHITLEY AVE	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ABDULLA Q AHMED	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	INSPECTOR: 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 EXCLUSION OF VERMIN [HSC 114259-114259.3]

Description/Corrective Action: Rodent droppings were noted in the soda cabinet. Please clean this area thoroughly and contact pest control service (First Class Pest Control comes monthly, last here 8/22).

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

Description/Corrective Action: Please provide paper towels and hand soap to restroom sink.

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

Description/Corrective Action: Dust was noted covering much of the food product. Please clean.

General Comments:

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

Signature: _____

Lee Johnson
Environmental Health Officer

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: RANCHITO MARKET	BUSINESS PHONE: (559) 992-3861	RECORD ID#: PR0000424	DATE: November 06, 2006
FACILITY SITE ADDRESS: 2749 WHITLEY AVE	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ABDULLA Q AHMED	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	INSPECTOR: Luis Flores

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: Personal effects (i.e. cosmetics) were observed stored inside of the walk-in box cooler near the luncheon products. Remove the identified items and discontinue this practice.

Violation: IMPROPER PLUMBING OR LIQUID WASTE DISPOSAL [HSC 114100]

Description/Corrective Action: The soda fountain liquid waste disposal line was observed to terminate inside of the restroom handwash sink drainpipe. The drain line was cut just below the sink counter surface level upon notification.

Violation: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980] [HSC 114010] [HSC 114080]

Description/Corrective Action: Food products and shelving in general store area were observed with significant dust accumulation. All food products and shelving are to be cleaned off for dust ASAP.

General Comments:

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

FA 1116 MIVVSLP

Signature: _____

Luis Flores
 Environmental Health Officer

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