



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> REYNA'S CAFE	<b>BUSINESS PHONE:</b> (559) 992-3422	<b>RECORD ID#:</b> PR0008416	<b>DATE:</b> May 02, 2012
<b>FACILITY SITE ADDRESS:</b> 1943 DAIRY AVE	<b>CITY:</b> CORCORAN	<b>ZIP CODE:</b> 93212	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> REYNA SALAS	<b>CERTIFIED FOOD HANDLER:</b> VERONICA SALAS	<b>EXP DATE:</b> 9/2/2013	<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 EXCLUSION OF VERMIN OR ANIMALS [HSC 114259-114259.3]

**Description/Corrective Action:** One dead cockroach and several apparent rodent droppings were noted in the front cabinet below the sink. Please clean this area thoroughly and contact your pest control company for service (last service: 3/28/12).

**General Comments:**

All hot and cold holding temperatures checked today were satisfactory (41 or less; 135 or greater). All hand wash sinks were fully stocked. Sanitizer level checked Ok.

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

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> REYNA'S CAFE	<b>BUSINESS PHONE:</b> (559) 992-3422	<b>RECORD ID#:</b> PR0008416	<b>DATE:</b> June 29, 2011
<b>FACILITY SITE ADDRESS:</b> 1943 DAIRY AVE	<b>CITY:</b> CORCORAN	<b>ZIP CODE:</b> 93212	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> REYNA SALAS	<b>CERTIFIED FOOD HANDLER:</b> VERONICA SALAS	<b>EXP DATE:</b> 9/2/2013	<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 MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

**Description/Corrective Action:** No sanitizer was detected in the dishwasher. Please service to provide at least 50 ppm chlorine to dishes during wash.

**Violation:** IMPROPER EXCLUSION OF VERMIN OR ANIMALS [HSC 114259-114259.3]

**Description/Corrective Action:** Rodent dropping were noted in the soda syrup cabinet. Please clean the area and contact pest control company for service.

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

**Description/Corrective Action:** The large reach in refrigerator measured 45F. Thermostat was adjusted during inspection. Please monitor and insure that all cold foods are held at 41F or less at all times.

General Comments:

The facility was noted to be generally clean and well maintained. Except as noted all hot and cold food temperatures checked were satisfactory. Advanced cooling techniques of ice bath are in use in this facility (good).

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

Agency Representative

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<b>FACILITY NAME:</b> REYNA'S CAFE'	<b>BUSINESS PHONE:</b> (559) 992-3422	<b>RECORD ID#:</b> PR0008416	<b>DATE:</b> September 03, 2010
<b>FACILITY SITE ADDRESS:</b> 1943 DAIRY AVE	<b>CITY:</b> CORCORAN	<b>ZIP CODE:</b> 93212	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> REYNA SALAS	<b>CERTIFIED FOOD HANDLER:</b> Veronica Salas	<b>EXP DATE:</b> 9/30/2010	<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 MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

**Description/Corrective Action:** Various sponges were noted in the hand wash sink. Please keep this sink clear at all times in order to make hand washing easier.

**Violation:** IMPROPER COOLING PROCEDURES [HSC 114002 & 114002.1]

**Description/Corrective Action:** A large pot was noted cooling in the large reach in refrigerator at 110 F. Large quantities of hot food must be cooled rapidly by transferring contents to smaller sized, flatter containers, which should be kept uncovered or vented until the food is cooled.

**General Comments:**

All hot holding and cold holding temperatures checked today were satisfactory. Hand wash sinks were fully stocked. 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:

*Quonma Simyous*

Received By:

*Lee Johnson - REHS*

Agency Representative

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