



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: SENIOR NUTRITION CENTER	BUSINESS PHONE: (559) 992-4419	RECORD ID#: PR0003563	DATE: December 04, 2009
FACILITY SITE ADDRESS: 800 DAIRY	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ROSALIE DELAROSA	CERTIFIED FOOD HANDLER: Lily Orosco	EXP DATE: 4/26/2012	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: None Noted

General Comments:

All hot and cold holding temperatures were satisfactory. Facility is clean and well-maintained. Make sure to keep a bottle of liquid hand soap at the large 2 compartment sink (dish soap is too strong for hand washing).

Food arrives at approximately 10:45 and is served at noon. Temperatures are logged upon receipt and food is keep in the oven or refrigerator until served.

Thank you.

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:

Lily Orosco

Received By: _____

Lee Johnson - 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: SENIOR NUTRITION CENTER	BUSINESS PHONE: (559) 992-4419	RECORD ID#: PR0003563	DATE: April 01, 2009
FACILITY SITE ADDRESS: 800 DAIRY	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: KINGS/TULARE AGENCY ON AGING	CERTIFIED FOOD HANDLER: Lily Orosco	EXP DATE: 4/26/2012	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: Please provide hotter water to the hand wash sink in the kitchen or provide soap and paper towels to the three compartment sink, where the water is hotter. Hot water is available in both restrooms.

General Comments:

All temperatures checked today were acceptable, except the salad, which measured 46 F. Please transport and serve at 41 F or less. The facility is very clean and well maintained. Proper staff hygiene was noted. Thank you.

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:

Lily Orosco

Received By: _____

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: SENIOR NUTRITION CENTER	BUSINESS PHONE: (559) 992-4419	RECORD ID#: PR0003563	DATE: December 22, 2008
FACILITY SITE ADDRESS: 800 DAIRY	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: KINGS/TULARE AGENCY ON AGING	CERTIFIED FOOD HANDLER: Lily Orosco	EXP DATE: 4/26/2012	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: None Noted

General Comments:

All hot and cold temperatures were satisfactory. Temps are logged daily. Facility is clean. Thank you.

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:
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Lily Orosco

Received By: _____

Lee Johnson

Environmental Health Specialist

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