



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: TACO BELL	BUSINESS PHONE: (559) 992-9022	RECORD ID#: PR0003943	DATE: November 02, 2011
FACILITY SITE ADDRESS: 2021 WHITLEY	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: BURNETT FOODS INC	CERTIFIED FOOD HANDLER: BERTHA LOPEZ	EXP DATE: 10/20/2011	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: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: Ice scoop at drive thru was noted with handle contacting ice. Please store scoop so that the handle does not contact ice to avoid potential cross contamination.

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

Description/Corrective Action: Flooring below shelving in the dry storage and soda areas was noted with accumulated debris. Please clean all flooring regularly to better supplement existing pest control.

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

Description/Corrective Action: Wiping rags were noted inside the rear hand sink upon arrival. Please keep all hand sinks empty and available for hand washing at all times.

General Comments:

All hot and cold temperatures checked today were satisfactory. Hand sinks and restrooms were fully stocked. Sanitizer levels checked were adequate. The store documents food temperatures 3 times daily on corporate QA logs.

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:

Bertha Lopez

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: TACO BELL	BUSINESS PHONE: (559) 992-9022	RECORD ID#: PR0003943	DATE: April 20, 2011
FACILITY SITE ADDRESS: 2021 WHITLEY	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: BURNETT FOODS INC	CERTIFIED FOOD HANDLER: BERTHA LOPEZ	EXP DATE: 10/20/2011	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: None Noted

General Comments:

All hot holding temperatures were above 135°F. All cold holding temperatures were noted below 41°F.

Restroom facilities were well stocked today.

All employee hand wash stations were stocked.

Employees were noted properly washing their hands today before putting on food grade gloves.

This facility does keep a Q/A log book of cooking, hot and cold holdig temperatures, and also uses a digital tip sensitive thermocouple for monitoring temperatures.

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 checked="" type="checkbox"/> Potential Food Safety All Star:

Bertha Lopez

Received By: _____

Troy Hommerding-REHS

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: TACO BELL	BUSINESS PHONE: (559) 992-9022	RECORD ID#: PR0003943	DATE: September 16, 2010
FACILITY SITE ADDRESS: 2021 WHITLEY	CITY: CORCORAN	ZIP CODE: 93212	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: BURNETT FOODS INC	CERTIFIED FOOD HANDLER: BERTHA LOPEZ	EXP DATE: 10/20/2011	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 checked today were satisfactory. All hand wash stations were fully stocked. Sanitizer levels were good. Food temperatures are logged three times daily by staff.

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 checked="" type="checkbox"/> Potential Food Safety All Star:

Bertha Lopez

Received By: _____

Lee Johnson - REHS

Agency Representative

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