



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> 7-ELEVEN #26170	<b>BUSINESS PHONE:</b> (559) 584-2398	<b>RECORD ID#:</b> PR0000491	<b>DATE:</b> August 04, 2009
<b>FACILITY SITE ADDRESS:</b> 395 N 11TH AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> RAVINDER & HARPREET SAHOTA	<b>CERTIFIED FOOD HANDLER:</b> HARPREET SAHOTA	<b>EXP DATE:</b> 4/13/2010	<b>INSPECTOR:</b> Yatee Patel - 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:** Clean the microwave, cheese nacho machine and the all the soda & slurpee machines. Observed debris and slimy syrup build-up.

**Violation:** RESTROOM FACILITIES NOT MAINTAINED [HSC 114250 & 114276]  
**Description/Corrective Action:** Replace paper towels & soap at all hand washing stations, including restroom.

**General Comments:**

General cleaning & maintainance needed.

All hot and cold food temperatures measured today were satisfactory.

The hand wash sink in the restroom was out of paper towels and soap. Keep it stocked with paper towels and soap at all times.

<b>RESULTS OF EVALUATION:</b> <input type="checkbox"/> PASS <input checked="" 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> _____ N/A <input type="checkbox"/> Potential Food Safety All Star:

*Eleanor Quinn*

Received By: \_\_\_\_\_

*Yatee Patel - REHS*

Agency Representative

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



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<b>FACILITY NAME:</b> 7-ELEVEN #26170	<b>BUSINESS PHONE:</b> (559) 584-2398	<b>RECORD ID#:</b> PR0000491	<b>DATE:</b> August 18, 2008
<b>FACILITY SITE ADDRESS:</b> 395 N 11TH AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> RAVINDER & HARPREET SAHOTA	<b>CERTIFIED FOOD HANDLER:</b> HARPREET SAHOTA	<b>EXP DATE:</b> 4/13/2010	<b>INSPECTOR:</b> 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 PLUMBING OR LIQUID WASTE DISPOSAL [HSC 114189-114242]

**Description/Corrective Action:** Please provide antisiphon device to mop sink faucet at hose connection. None noted.

**Violation:** IMPROPER COOKING TEMPERATURES [HSC 114004 - 114012]

**Description/Corrective Action:** The right self service cold display temperature measured 47 F, although the thermometer for the unit read 40 F. Adjust the thermostat so that foods are kept at 41 F at all times. Repair or replace thermometer in the unit.

**Violation:** IMPROPER CLEANLINESS OR HYGIENE OF FOODHANDLERS [HSC 113967-113973]

**Description/Corrective Action:** The microwave, the cabinetry below the soda dispensers and slurpee dispensers. and the floor beneath the soda syrups are in need of cleaning.

**General Comments:**

All hot temperatures were above 135 (good). Daily temperature logs are kept, but no information was available for August.

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

*Linda Garcia*

Received By:

*Lee Johnson*

Environmental Health Specialist

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### FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> 7-ELEVEN #26170	<b>BUSINESS PHONE:</b> (559) 584-2398	<b>RECORD ID#:</b> PR0000491	<b>DATE:</b> March 10, 2008
<b>FACILITY SITE ADDRESS:</b> 395 N 11TH AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> RAVINDER & HARPREET SAHOTA	<b>CERTIFIED FOOD HANDLER:</b> HARPREET SAHOTA	<b>EXP DATE:</b> 4/13/2010	<b>INSPECTOR:</b> Yatee Patel

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:** Secure CO2 cylinders.

**Violation:** IMPROPER FOOD TEMPERATURE MONITORING [HSC 113998 & 114000]

**Description/Corrective Action:** Maintain temp logs. Not available during inspection.

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

**Description/Corrective Action:** General housekeeping needs improvement, including walls, floors and equipment at the back storage area.

**General Comments:**

Purchase hand soap. Currently employee uses detergent.

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

*Yatee Patel*

Signature: \_\_\_\_\_

Yatee Patel  
Environmental Health Officer

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**FOOD SAFETY EVALUATION REPORT**

<b>FACILITY NAME:</b> 7-ELEVEN #26170	<b>BUSINESS PHONE:</b> (559) 584-2398	<b>RECORD ID#:</b> PR0000491	<b>DATE:</b> October 19, 2007
<b>FACILITY SITE ADDRESS:</b> 395 N 11TH AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> 1ST FOLLOW UP INSPECTION
<b>OWNER NAME:</b> RAVINDER & HARPREET SAHOTA	<b>CERTIFIED FOOD HANDLER:</b>	<b>EXP DATE:</b>	<b>INSPECTOR:</b> Yatee Patel

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 HOT HOLDING TEMPERATURE(S) [HSC 113996]

**Description/Corrective Action:** Hot dogs measured 125° - 129° F.  
 Maintain all hot foods at 135° F or higher at all times.

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

**Description/Corrective Action:** Reach-in display case measured 47° F. Please repair unit so that foods are held at 41° F or below.  
 Maintain cold foods at 41° F or below at all times

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

**Description/Corrective Action:** Replace paper towels in restroom.

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

**Description/Corrective Action:** General housekeeping needs improvement, including walls, floors and equipment.

**Violation:** IMPROPER FOOD TEMPERATURE MONITORING [HSC 113998 & 114000]

**Description/Corrective Action:** No thermometer present at facility. Employee stated that they heat the prepackaged foods in the microwave and then place it in the hot holding unit. Visual appearance is the determination of foods being hot. please purchase a thermometer & keep logs.

**General Comments:**

Please maintain all Potentially Hazardous Foods at the Correct temperatures.  
 Contact this department when the above violations are corrected.

<b>RESULTS OF EVALUATION:</b> <input type="checkbox"/> PASS <input checked="" 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> _____ N/A <input type="checkbox"/> Potential Food Safety All Star:

*Lisa Mefford*

Signature:

*Yatee Patel*

Environmental Health Officer

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