

# FOOD SAFETY EVALUATION REPORT

KINGS COUNTY HEALTH DEPARTMENT  
DIVISION OF ENVIRONMENTAL  
HEALTH SERVICES



330 CAMPUS DRIVE  
HANFORD, CA 93230  
(559) 584-1411  
FAX (559) 584-6040

BUSINESS NAME	<u>Art Works</u>	DATE:	<u>7/28/08</u>
BUSINESS ADDRESS	<u>120 W Sixth St</u>	MAILING ADDRESS	
OWNER/OPERATOR	<u>Steve Brister</u>	LIC #	
		ID#	

Today's inspection occurred in conjunction with city of Hanford Code Enforcement.

The facility has expanded significantly beyond its original permitting with our office for an espresso cart, without undergoing plan check with our office. Equipment was noted to be non-commercial grade in some cases, some equipment requires exhaust hoods, and none is present.

Espresso, reportedly prepared on site was noted packaged for sale in the display counter, with no label present.

All refrigerator temps were at or below 41F, except the front display case, which measured 46F. Please adjust to maintain 41F or less.

Facility is in need of regular & thorough cleaning and improved organization. Equipment requiring an exhaust hood may only be operated under a hood. Discontinue use or provide our office with hood plans.

Inspector: [Signature]  
Lee Johnson

Received by: [Signature]



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> ART WORKS	<b>BUSINESS PHONE:</b> (559) 583-8790	<b>RECORD ID#:</b> PR0005157	<b>DATE:</b> May 28, 2008
<b>FACILITY SITE ADDRESS:</b> 120 W SIXTH ST	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> STEVE BANISTER	<b>CERTIFIED FOOD HANDLER:</b> WM. STEVE	<b>EXP DATE:</b> 3/7/2009	<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 COLD HOLDING TEMPERATURE(S) [HSC 113996]  
**Description/Corrective Action:** Display measured 53° F. Ham stored inside display.  
Maintain cold foods at 41° F or below at all times
- Violation:** IMPROPER CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]  
**Description/Corrective Action:** Poor sanitation was observed at the facility. Establish a daily cleaning schedule.
- Violation:** IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]  
**Description/Corrective Action:** General housekeeping needs improvement, including walls, floors and equipment.
- Violation:** FOODS FROM UNAPPROVED SOURCES [HSC 114021 - 114029]  
**Description/Corrective Action:** Facility is still frying foods and grilling foods which creates grease accumulation.  
Absolutely no frying or grilling until plans for installing a hood are submitted to our department.

**General Comments:**

Facility is in need of cleaning and organizing.  
If the above violations continue this facility will be scheduled for a hearing that may include fines and/or permit suspension.

<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:

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

Yatee Patel  
Environmental Health Officer

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



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**FOOD SAFETY EVALUATION REPORT**

<b>FACILITY NAME:</b> ART WORKS	<b>BUSINESS PHONE:</b> (559) 583-8790	<b>RECORD ID#:</b> PR0005157	<b>DATE:</b> November 30, 2007
<b>FACILITY SITE ADDRESS:</b> 120 W SIXTH ST	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> STEVE BANISTER	<b>CERTIFIED FOOD HANDLER:</b> WM. STEVE	<b>EXP DATE:</b> 3/7/2009	<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 COLD HOLDING TEMPERATURE(S) [HSC 113996]

**Description/Corrective Action:** Reach-in measured 49° F. (second warning)  
 Maintain cold foods at 41° F or below at all times

**Violation:** OTHER PERMIT VIOLATION

**Description/Corrective Action:** Observed facility use a fryer. No fryer allowed without hood. Please submit plans if you wish to continue.

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

**Description/Corrective Action:** Please have a thermometer inside reach-in.

**General Comments:**

Facility is not equipped for large scale food. Please be limited to sandwiches.

<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:

*Steve Banister*

Signature:

*Yatee Patel*

Environmental Health Officer

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