



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> B & P LIQUOR	<b>BUSINESS PHONE:</b> (559) 584-7344	<b>RECORD ID#:</b> PR0000647	<b>DATE:</b> October 28, 2009
<b>FACILITY SITE ADDRESS:</b> 919 GARDNER AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> KAMALJIT KAUR HEERA	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> Liliana Stransky - 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:

Cold holding temperatures were at or below 41°F.  
The store was observed clean and orderly.  
Thank you!

<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:

Liliana Stransky - REHS

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

Agency Representative

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



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<b>FACILITY NAME:</b> B & P LIQUOR	<b>BUSINESS PHONE:</b> (559) 584-7344	<b>RECORD ID#:</b> PR0000647	<b>DATE:</b> October 03, 2008
<b>FACILITY SITE ADDRESS:</b> 919 GARDNER AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> KAMALJIT KAUR HEERA	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> Intern Volunteer

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:** Rodent droppings were observed underneath soda machine. Please contact pest control for service.

**General Comments:**

**RESULTS OF EVALUATION:**  PASS  NEEDS IMPROVEMENT  FAIL

**Reinspection Required:** Yes:  No:

**Reinspection Date (on or after):** N/A

Potential Food Safety All Star:

Intern Volunteer

Environmental Health Specialist

Received By:

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### FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> B & P LIQUOR	<b>BUSINESS PHONE:</b> (559) 584-7344	<b>RECORD ID#:</b> PR0000647	<b>DATE:</b> October 11, 2007
<b>FACILITY SITE ADDRESS:</b> 919 GARDNER AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> KAMALJIT KAUR HEERA	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<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:** VERMIN INFESTATION [HSC 114259.1]

**Description/Corrective Action:** Droppings were observed inside the soda machine cabinet.  
please contact Pest Control Service ASAP. Contact this department within a week to confirm service.

**General Comments:**

All cold food temperatures measured today were satisfactory.

<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:
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Signature:

Yatee Patel

Environmental Health Officer

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