



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> BABY'S NUTRITION	<b>BUSINESS PHONE:</b> (559) 582-2500	<b>RECORD ID#:</b> PR0008403	<b>DATE:</b> June 29, 2011
<b>FACILITY SITE ADDRESS:</b> 365 CAMPUS DR STE 101	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> NASSER SALEM	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<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 MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

**Description/Corrective Action:** No hot water available at the restroom. Second violation. Have a certified plumber come in immediately.

**General Comments:**

Cold holding unit was at 39° F.

Facility observed very clean & organized.

Thank you.

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

**Reinspection Required:** Yes:  No:

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

Potential Food Safety All Star:

Received By:

Yatee Patel - REHS

Agency Representative

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



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FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> BABY'S NUTRITION	<b>BUSINESS PHONE:</b> (209) 613-6567	<b>RECORD ID#:</b> PR0008403	<b>DATE:</b> June 15, 2010
<b>FACILITY SITE ADDRESS:</b> 365 CAMPUS DR STE 101	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> NASSER SALEM	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> Susan Lee-Yang - 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:

A follow-up re-inspection was performed today of this facility to verify compliance with required corrective actions for violations noted on the last routine inspection. The following was noted during today's inspection:

-Hot water is now available for proper hand washing in the restroom.

Thank you for your cooperation!

<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:

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

Susan Lee-Yang - REHS

Agency Representative

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FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> BABY'S NUTRITION	<b>BUSINESS PHONE:</b> (209) 613-6567	<b>RECORD ID#:</b> PR0008403	<b>DATE:</b> June 01, 2010
<b>FACILITY SITE ADDRESS:</b> 365 CAMPUS DR STE 101	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> NASSER SALEM	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> Susan Lee-Yang - 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:** Hand wash station in restroom did not have hot water. Please provide hot water to hand wash station immediately.

**Violation:** FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

**Description/Corrective Action:** Observed boxes of string cheese stored on the floor in the walk-in refrigerator. All food items must be stored at least 6 inches off the floor.

**General Comments:**

Walk-in refrigerator was noted at 38°F.

Restroom was stocked with soap and paper towels.

A re-inspection will be performed at no charge to verify compliance with today's noted violations. Should additional re-inspections be required, the facility will be assessed \$220 per inspection.

<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> 6/8/2010 <input type="checkbox"/> Potential Food Safety All Star:

Susan Lee-Yang - REHS

Received By:

Agency Representative

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