



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> BLACK BEAR DINER	<b>BUSINESS PHONE:</b> (559) 584-8278	<b>RECORD ID#:</b> PR0000581	<b>DATE:</b> November 04, 2009
<b>FACILITY SITE ADDRESS:</b> 1790 W LACEY BLVD	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> 1ST FOLLOW UP INSPECTION
<b>OWNER NAME:</b> ROBERT G. ROSE	<b>CERTIFIED FOOD HANDLER:</b> ROBERT VELASQUEZ	<b>EXP DATE:</b> 1/16/2011	<b>INSPECTOR:</b> 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:

Today's re-inspection revealed the following: Refrigeration temperatures measured today were at the required regulatory requirements of 41°F or below. The pooled eggs were measured at 40°F and the storage cotainer was noted embedded in an ice bath. The reach in unit on the west end of the cooks line was noted clean today. Cleaning around the deep fat fryer has improved.

All violations noted on the previous inspection report have been corrected, 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:

*Roberto Rivera*

*Troy Hommerding-REHS*

Received By:

Agency Representative

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



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> BLACK BEAR DINER	<b>BUSINESS PHONE:</b> (559) 584-8278	<b>RECORD ID#:</b> PR0000581	<b>DATE:</b> October 15, 2009
<b>FACILITY SITE ADDRESS:</b> 1790 W LACEY BLVD	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> ROBERT G. ROSE	<b>CERTIFIED FOOD HANDLER:</b> ROBERT VELASQUEZ	<b>EXP DATE:</b> 1/16/2011	<b>INSPECTOR:</b> 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:** IMPROPER HOLDING OF RAW SHELL EGGS [HSC 114373]

**Description/Corrective Action:** Raw shelled eggs were noted being stored at room temperature on the counter top, the operator stated they were there for the breakfast rush and will be placed back into the refrigeration unit.

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

**Description/Corrective Action:** All food in the refrigeration units must be covered to prevent cross contamination and/or adulteration of the products.

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

**Description/Corrective Action:** The reach in refrigeration unit at the west end of the cooks line was noted with old caked food debris,, please clean.

An accumulation of grease was noted by the deep fat fryer, please clean around the fryer unit.

**Violation:** IMPROPER FOOD HANDLING PRACTICES [HSC 113961 - 113973]

**Description/Corrective Action:** Raw shelled pooled eggs were noted stored on the counter top in a metal bin on a bed of ice, temperature was measured at 65°F. Pooled eggs must be kept at or below 41°F. If this method is going to be continued for keeping the pooled eggs cooled on the counter top, please embed the metal bin into the ice, surrounding the entire container with ice, not just setting the bin on top of the ice.

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

**Description/Corrective Action:** Under counter pull out refrigeration cabinets on the cooks line (both sides) were measured between 45°F-58°F. Please remove all potentially hazardous food from these units until all refrigeration units can be maintained at 41°F or below. This includes food from the top service bins (i.e. tuna fish mix, potato salad, cottage cheese.)

**General Comments:**

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



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> BLACK BEAR DINER	<b>BUSINESS PHONE:</b> (559) 584-8278	<b>RECORD ID#:</b> PR0000581	<b>DATE:</b> October 15, 2009
<b>FACILITY SITE ADDRESS:</b> 1790 W LACEY BLVD	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> ROBERT G. ROSE	<b>CERTIFIED FOOD HANDLER:</b> ROBERT VELASQUEZ	<b>EXP DATE:</b> 1/16/2011	<b>INSPECTOR:</b> 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.

A reinspection will be conducted on or after 10/29/09 for the violation noted today, please have them corrected by then.

Restroom facility were noted properly stocked today.

Kitchen warewashing machine was noted properly sanitizing as test strips indicated 50 ppm chlorine.

Kitchen manager did have a digital thermometer present.

Kitchen hand wash sink was noted properly stocked.

Walk-in refrigeration unit was measured below 41°F and was well organized today. All other cold holding units were also measured below 41°F.

RESULTS OF EVALUATION:  PASS  NEEDS IMPROVEMENT  FAIL

Reinspection Required: Yes:  No:

Reinspection Date (on or after): 10/29/2009

Potential Food Safety All Star:

*Robert Rose*

Received By:

*Troy Hommerding-REHS*

Agency Representative

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



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> BLACK BEAR DINER	<b>BUSINESS PHONE:</b> (559) 584-8278	<b>RECORD ID#:</b> CO0006256	<b>DATE:</b> May 06, 2009
<b>FACILITY SITE ADDRESS:</b> 1790 W LACEY BLVD	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> 1ST FOLLOW UP INSPECTION
<b>OWNER NAME:</b> ROBERT G. ROSE	<b>CERTIFIED FOOD HANDLER:</b> ROBERT VELASQUEZ	<b>EXP DATE:</b> 1/16/2011	<b>INSPECTOR:</b> 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:** IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

**Description/Corrective Action:** Reach in refrigeration unit noted on the previous complaint inspection was measured cold holding at 35°F today; however, excessive condensate build up was still noted inside the bottom of the unit. Please repair or replace unit. No food items were noted stored inside the unit today, only the top service bins were being used.

**General Comments:**

Today's reinspection revealed the following:

Pull out refrigeration drawers on the cooks line ranged from 38°F-47°F, please keep checking on these units. This department recommends keeping a temperature monitoring log of these refrigerations, at least two to three temperature measurements per day.

<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:

Received By:

Troy Hommerding-REHS

Agency Representative

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