



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

FACILITY NAME: CAL'S CATERING	BUSINESS PHONE: (559) 584-5656	RECORD ID#: PR0000433	DATE: January 10, 2011
FACILITY SITE ADDRESS: 301 E FIFTH ST	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: CAL CLEMENT & VICTORIA BROOKS	CERTIFIED FOOD HANDLER: VICTORIA BROOKS	EXP DATE:	INSPECTOR: 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: None Noted

General Comments:

Cold holding units were at or below 41°F.

Hot water, soap & paper towel available.

Operator mainly cooks off site.

Remember to store raw meats separate from ready to eat foods in the freezer.

Operator scheduled the certification class for Feb 11th 2001. Currently expired. Fax results ASAP.

Overall facility is in good operating condition.

RESULTS OF EVALUATION: <input checked="" type="checkbox"/> PASS <input type="checkbox"/> NEEDS IMPROVEMENT <input type="checkbox"/> FAIL	Reinspection Required: Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/>
	Reinspection Date (on or after): <u> N/A </u> <input type="checkbox"/> Potential Food Safety All Star:

Victoria J Brooks

Yatee Patel - REHS

Received By: _____

Agency Representative _____

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: CAL'S CATERING	BUSINESS PHONE: (559) 584-5656	RECORD ID#: PR0000433	DATE: September 21, 2009
FACILITY SITE ADDRESS: 301 E FIFTH ST	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: CAL CLEMENT & VICTORIA BROOKS	CERTIFIED FOOD HANDLER: VICTORIA BROOKS	EXP DATE: 11/15/2010	INSPECTOR: 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: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: Remember to store raw meat products below veggies inside the refrigerator. Operator separated foods during inspection.

General Comments:

Cold storage units were observed functional. Storage facility was observed clean and organized.

Thank you!

RESULTS OF EVALUATION: <input checked="" type="checkbox"/> PASS <input type="checkbox"/> NEEDS IMPROVEMENT <input type="checkbox"/> FAIL	Reinspection Required: Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/>
	Reinspection Date (on or after): <u> N/A </u> <input type="checkbox"/> Potential Food Safety All Star:

Victoria Brooks

Liliana Stransky - REHS

Received By:

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: CAL'S CATERING	BUSINESS PHONE: (559) 584-5656	RECORD ID#: PR0000433	DATE: June 09, 2008
FACILITY SITE ADDRESS: 301 E FIFTH ST	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: CAL CLEMENT & VICTORIA BROOKS	CERTIFIED FOOD HANDLER: VICTORIA BROOKS	EXP DATE: 11/15/2008	INSPECTOR: 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: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]
Description/Corrective Action: Separate raw meats from previously cooked items and store at the lowest point of the refrigerator

General Comments:

The food facility is well maintained and operated.
Use hand soap instead of dish washing liquid.
Observed bleach, please use to sanitize utensils.
Keep an eye on all cold holding units.

RESULTS OF EVALUATION: <input checked="" type="checkbox"/> PASS <input type="checkbox"/> NEEDS IMPROVEMENT <input type="checkbox"/> FAIL	Reinspection Required: Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/> Reinspection Date (on or after): _____ N/A <input type="checkbox"/> Potential Food Safety All Star:
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Cal Clement

Signature: _____

Yatee Patel

Environmental Health Officer

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