



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: CANDY BOUQUET	BUSINESS PHONE: (559) 583-8880	RECORD ID#: PR0006539	DATE: September 02, 2009
FACILITY SITE ADDRESS: 208 N 12TH AVE 112	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: GINA BOESPFLUG	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	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: None Noted

General Comments:

The facility is very well maintained.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

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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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: CANDY BOUQUET	BUSINESS PHONE: (559) 583-8880	RECORD ID#: PR0006539	DATE: October 24, 2008
FACILITY SITE ADDRESS: 208 N 12TH AVE 112	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: GINA BOESPFLUG	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	INSPECTOR: 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: None Noted

General Comments:

Handwashing station was equipped with soap and paper towels. Facility is well maintained.

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

Received By:

Environmental Health Specialist

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: CANDY BOUQUET	BUSINESS PHONE: (559) 583-8880	RECORD ID#: PR0006539	DATE: October 02, 2007
FACILITY SITE ADDRESS: 208 N 12TH AVE 112	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: GINA BOESPFLUG	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	INSPECTOR: Liliana Stransky

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

Description/Corrective Action:

General Comments:

Overall, the food facility appeared in good operational 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): _____ N/A <input type="checkbox"/> Potential Food Safety All Star:

Gina Boespflug

Signature: _____

Liliana Stransky

Environmental Health Officer

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