



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: CHARLEY'S GRILLED SUBS	BUSINESS PHONE: (559) 582-8822	RECORD ID#: PR0007540	DATE: July 26, 2011
FACILITY SITE ADDRESS: 1675 W LACEY BLVD VCO1	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: 2ND+ FOLLOWUP INSPECTION
OWNER NAME: FRESH STEAKERY FOOD MGMT	CERTIFIED FOOD HANDLER: BOONE CHOU	EXP DATE: 7/10/2016	INSPECTOR: 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 re-inspection. The following was noted during today's inspection:

- A functioning prep unit replaced the non-functioning unit.
- The prep unit was noted at 41°F and cut tomatoes were noted at 40°F.
- The front hand wash station will no longer be used since there is no permanent wall mounted paper towel dispenser.
- Please remove the non-functioning prep unit from the facility.
- It is recommended that the person in charge at this facility take a certified food manager's course.

Thank you for your cooperation in resolving these issues.

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:

Received By:

Susan Lee-Yang - 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

FACILITY NAME: CHARLEY'S GRILLED SUBS	BUSINESS PHONE: (559) 582-8822	RECORD ID#: PR0007540	DATE: July 21, 2011
FACILITY SITE ADDRESS: 1675 W LACEY BLVD VCO1	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: 2ND+ FOLLOWUP INSPECTION
OWNER NAME: FRESH STEAKERY FOOD MGMT	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	INSPECTOR: 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: NO CURRENT CERTIFIED FOOD SAFETY PERSON ON STAFF [HSC 113947-113947.6]

Description/Corrective Action: *No certified food handler has been identified for the facility.

Violation: IMPROPER MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

Description/Corrective Action: *Front handwash station was noted to still be missing a wall-mounted papertowel dispenser.

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

Description/Corrective Action: *Prep line was noted to have not been repaired and is not maintaining temperature below 41°F. Containers of ice were noted to have been placed in the refrigeration unit below the prep line; it is assumed this was an attempt to lower the temperature. Measured temperature of ambient air under prep line was >52°F and food tested on prep line was >51°F .

General Comments:

An office hearing has been scheduled for Thursday, July 28, 2011 at 10 a.m. A representative for the business must attend the hearing to prove why the food vending permit should not be revoked.

Our office is located at 330 Campus Drive, Hanford, CA 93230.

RESULTS OF EVALUATION: <input type="checkbox"/> PASS <input type="checkbox"/> NEEDS IMPROVEMENT <input checked="" 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:

Received By:

Susan Lee-Yang - 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

Table with 4 columns: FACILITY NAME, BUSINESS PHONE, RECORD ID#, DATE, FACILITY SITE ADDRESS, CITY, ZIP CODE, INSPECTION TYPE, OWNER NAME, CERTIFIED FOOD HANDLER, EXP DATE, INSPECTOR.

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: Facility needs to provide permanently mounted paper towel dispenser for front hand wash station.

Violation: NO CURRENT CERTIFIED FOOD SAFETY PERSON ON STAFF [HSC 113947-113947.6]

Description/Corrective Action: Our Department has not recieved a verification that someone from the facility is registered for a certified food handler class. Please submit verification no later than 4:00 PM tomorrow, Friday, July 15, 2011. Failure to do so will result in an administrative hearing for which you will be assessed \$220.

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

Description/Corrective Action: The prep unit was still not repaired. The ambient temperature was noted at 62°F and cut tomatoes were noted at 50°F.

General Comments:

A 2nd re-inspection will be performed to verify compliance with today's noted violations for which the facility will be assessed \$220. Should additional re-inspections be required, the facility will be assessed \$220 per inspection and/or an admistrative hearing.

RESULTS OF EVALUATION: [] PASS [] NEEDS IMPROVEMENT [X] FAIL. Reinspection Required: Yes: [] No: [X]. Reinspection Date (on or after): 7/20/2011. [] Potential Food Safety All Star:

Dakota Camp

Received By:

Susan Lee-Yang - REHS

Agency Representative

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