



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: CIRCLE K STORE #2701028	BUSINESS PHONE: (559) 582-7878	RECORD ID#: PR0000309	DATE: August 26, 2008
FACILITY SITE ADDRESS: 1665 W HANFORD/ARMONA RD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: CIRCLE K STORES INC	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	INSPECTOR: Susan Lee-Yang

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 COLD HOLDING TEMPERATURE(S) [HSC 113996]

Description/Corrective Action: Reach in unit storing sandwiches and burritos were measured at 52° F.

Operator stated unit usually re-circulates during this time and will call for service if temperature doesn't drop.

All cold potentially hazardous foods must be stored at or below 41° F.

General Comments:

All other reach-in unit was measured at or below 41° F.

All food products were stored off the ground, good.

All reach-in units had thermometers present.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Donna Nguyen

Received By:

Susan Lee-Yang

Environmental Health Specialist

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: CIRCLE K STORE #2701028	BUSINESS PHONE: (559) 582-7878	RECORD ID#: PR0000309	DATE: February 07, 2008
FACILITY SITE ADDRESS: 1665 W HANFORD/ARMONA RD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: CIRCLE K STORES INC	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	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: IMPROPER COLD HOLDING TEMPERATURE(S) [HSC 113996]

Description/Corrective Action: Cold case next to machine measured 50° F.
 Immediately move all foods to the working unit until cold case is fixed.

Violation: LACK OF OR IMPROPER USE OF THERMOMETERS [HSC 114157-114159]

Description/Corrective Action: Inaccurate thermometer in cold case - read 41°F.
 Replace or repair.

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

Description/Corrective Action: General housekeeping needs improvement, including walls, floors and equipment of back storage area. Observed Unsanitary.

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

Description/Corrective Action: Observed debris and syrup buildup around the soda dispenser nozzles. Properly clean the soda nozzles more frequently to avoid contamination.

Violation: IMPROPER REHEATING PROCEDURES FOR HOT HOLDING [HSC 114016]

Description/Corrective Action: Currently facility warms pre packed foods into hot holding unit for few hours until hot. This is not a heating device. Use the microwave & heat product to 165° F, then place food into the hot holding unit and maintain temp to 135° F - Discontinue this practice immediately.

General Comments:

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

Leann

Signature: _____

Yatee Patel

Environmental Health Officer

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: CIRCLE K STORE #2701028	BUSINESS PHONE: (559) 582-7878	RECORD ID#: PR0000309	DATE: August 06, 2007
FACILITY SITE ADDRESS: 1665 W HANFORD/ARMONA RD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: CIRCLE K STORES INC	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	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: IMPROPER FOOD TEMPERATURE MONITORING [HSC 113998 & 114000]

Description/Corrective Action: Provide accurate easily readable thermometers for all refrigerator units.

General Comments:

All hot and cold food temperatures measured today were satisfactory.

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> </u> N/A <input type="checkbox"/> Potential Food Safety All Star:

Signature: _____

Yatee Patel

Environmental Health Officer

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