



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: DENNY'S	BUSINESS PHONE: (559) 582-3160	RECORD ID#: PR0000319	DATE: March 20, 2012
FACILITY SITE ADDRESS: 1699 W LACEY BLVD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: HYE QUALITY FOODS INC	CERTIFIED FOOD HANDLER: MICHELE J HICKS	EXP DATE: 8/15/2012	INSPECTOR: Kimberly Marquez

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: Observed raw shelled eggs noted at 51F located at cold top at cook line. Employee immediately addressed issue. Thank you!. Please maintain shelled eggs at 45F of below.

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

Description/Corrective Action: Observed several tiles missing and or grout deteriorating at cook line and a few at service line. Please fix.

Observed heavy grease build up under fryer units. Please clean and maintain clean.

General Comments:

Observed all hand sinks fully stocked with soap and paper towels.

Observed hot holding at 135F and above. Excellent job.

Observed restrooms clean and in good 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:

Received By:

Kimberly Marquez

Agency Representative

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: DENNY'S	BUSINESS PHONE: (559) 582-3160	RECORD ID#: PR0000319	DATE: September 30, 2011
FACILITY SITE ADDRESS: 1699 W LACEY BLVD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: HYE QUALITY FOODS INC	CERTIFIED FOOD HANDLER: MICHELE J HICKS	EXP DATE: 8/15/2012	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:

All hot, cold, and final cooking food temperatures monitored today were satisfactory.
Temperature log completed today.
Sanitizer for dishwasher was 100 PPM of chlorine & 200 PPM for QAT for buckets.
The food handling practice observed was very good.
In rush hours please lower reach-in thermostat so that foods hold well below 41° F.
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): <u> N/A </u> <input type="checkbox"/> Potential Food Safety All Star:

E. Candone

Received By: _____

Yatee Patel - REHS

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: DENNY'S	BUSINESS PHONE: (559) 582-3160	RECORD ID#: PR0000319	DATE: March 17, 2011
FACILITY SITE ADDRESS: 1699 W LACEY BLVD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: 1ST FOLLOW UP INSPECTION
OWNER NAME: HYE QUALITY FOODS INC	CERTIFIED FOOD HANDLER: MICHELE J HICKS	EXP DATE: 8/15/2012	INSPECTOR: Kimberly Marquez

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 routine inspection. The following was noted during today's inspection: Cold holding unit where salad is prep was working properly at time of inspection salad noted at 40° F. Observed a significant difference in cleaning in back of house by cook line. Shatter proof cover was on light is walk -in freezer. Thank you for fixing violations noted on last inspection.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

E Cardone

Received By:

Kimberly Marquez

Agency Representative

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