



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

<b>FACILITY NAME:</b> ME-N-ED'S PIZZA PARLOR	<b>BUSINESS PHONE:</b> (559) 582-6205	<b>RECORD ID#:</b> PR0003731	<b>DATE:</b> April 24, 2012
<b>FACILITY SITE ADDRESS:</b> 2483 N 10TH AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> JOHN A. FERDINANDI	<b>CERTIFIED FOOD HANDLER:</b> LYNDA M. MENDEZ	<b>EXP DATE:</b> 10/25/2013	<b>INSPECTOR:</b> 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: IMPROPER CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]

Description/Corrective Action: Observed trash accumulation around and inside soda fountain dispenser. Clean dispenser and area regularly.

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

Description/Corrective Action: Both restrooms located in the back facility did not have adequate hot water for the hand wash stations. Call for service and ensure hand wash stations have hot water available.

General Comments:

Main hand wash station and front restrooms had hot water, soap, and paper towels.

All cold holding units were noted satisfactory at time of inspection.

Potato salad and tomatoes in the salad bar were noted below 41F.

Please correct today's noted violations to prevent further re-inspections.

All employees had current CA Food Handler Certificates.

RESULTS OF EVALUATION: [X] PASS [ ] NEEDS IMPROVEMENT [ ] FAIL

Reinspection Required: Yes: [ ] No: [X]

Reinspection Date (on or after): N/A

[ ] 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



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FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> ME-N-ED'S PIZZA PARLOR	<b>BUSINESS PHONE:</b> (559) 582-6205	<b>RECORD ID#:</b> PR0003731	<b>DATE:</b> September 21, 2011
<b>FACILITY SITE ADDRESS:</b> 2483 N 10TH AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> JOHN A. FERDINANDI	<b>CERTIFIED FOOD HANDLER:</b> LYNDA M. MENDEZ	<b>EXP DATE:</b> 10/25/2013	<b>INSPECTOR:</b> 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:** IMPROPER CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]

**Description/Corrective Action:** Observed food debris on can opener, around soda machine, and in storage room. Thorough cleaning needs to occur more frequently.

**General Comments:**

Hand wash station had hot water, soap, and paper towels.

All cold holding units were noted at or below 41°F.

Potato salad and tomatoes in salad bar were noted below 41°F.

Please adjust hot water in south restrooms to ensure adequate hot water is available.

Please correct today's noted violation to prevent further re-inspections.

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

Received By: \_\_\_\_\_

*Susan Lee-Yang - REHS*  
\_\_\_\_\_  
Agency Representative

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**FOOD SAFETY EVALUATION REPORT**

<b>FACILITY NAME:</b> ME-N-ED'S PIZZA PARLOR	<b>BUSINESS PHONE:</b> (559) 582-6205	<b>RECORD ID#:</b> PR0003731	<b>DATE:</b> February 25, 2011
<b>FACILITY SITE ADDRESS:</b> 2483 N 10TH AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> 1ST FOLLOW UP INSPECTION
<b>OWNER NAME:</b> JOHN A. FERDINANDI	<b>CERTIFIED FOOD HANDLER:</b> DIANA WISINSKI	<b>EXP DATE:</b> 11/28/2011	<b>INSPECTOR:</b> 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:** IMPROPER CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]

**Description/Corrective Action:** Observed storage room with trash and debris accumulation.  
Please clean.

**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:

- Hot water was available in both men and women's restroom.
- Food in the walk-in were stored on shelves and pallets.
- Observed can opener cleaned.

Please focus on detail cleaning throughout the entire facility.

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

Received By: \_\_\_\_\_

*Susan Lee-Yang - REHS*

Agency Representative

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