

# INSPECTION REPORT

KINGS COUNTY HEALTH DEPARTMENT  
DIVISION OF ENVIRONMENTAL  
HEALTH SERVICES  
<http://www.countyofkings.com/health/ehs>



330 CAMPUS DRIVE  
HANFORD, CA 93230  
(559) 584-1411  
FAX: (559) 584-6040

BUSINESS NAME:	<u>Quick Stop Market</u>	DATE:	<u>2-8-12</u>
ADDRESS:	<u>801 S. Phillips St / Hanford, CA</u>		
OWNER/OPERATOR	_____		
PHONE #:	LIC PLATE #:	PROGRAM:	<u>1613</u>

*\* Routine Inspection \**

*Correct the following deficiencies:*

- ① Remove moldy lemons and old broccoli*
- ② Place labels to indicate the cost of the produce*
- ③ Do not sell individual sticks of butter. Pre-packaged items must be sold as one unit.*

*Inspection Result - NEEDS IMPROVEMENT*

Inspector: \_\_\_\_\_

Handwritten signature of the inspector in blue ink.

Received by: \_\_\_\_\_

Handwritten signature of the person receiving the inspection report in blue ink.



County of Kings - Department of Public Health

Environmental Health Services Division

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FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> QUICK SHOP MARKET	<b>BUSINESS PHONE:</b> (559) 584-7457	<b>RECORD ID#:</b> PR0000607	<b>DATE:</b> December 06, 2010
<b>FACILITY SITE ADDRESS:</b> 801 S PHILLIPS ST	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> MOHMED NAAMI	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> 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:

The food facility appeared in good operational condition.

Remember to rotate food items in-order to avoid selling expired items and moths inside food bags.

Be sure to dust off shelves and canned items.

All cold holding units measured 41F and below.

Thank you.

<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:

Yatee Patel - 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

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: SPOILED OR ADULTERATED FOOD PRODUCTS DISPLAYED [HSC 113980 & 114055]

Description/Corrective Action: Observed and removed one 2 lbs. Texas Enriched American Long Grain Rice from shelf due to presence of moths inside rice bag. Operator threw rice bag into trash can. Observed twelve 13 fl oz. Enfamil Lactofree Lipil Milk-Based Infant Formula Concentrated Liquid and twelve 13 fl oz. Enfamil ProSobee Lipil Soy Infant Formula Concentrated Liquid with expired dates. Please immediately remove expired baby formulas from shelf.

General Comments:

All cold holding units measured satisfactory. Facility is in satisfactory operating condition.

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:

Amir Nadeem

Susan Lee-Yang - REHS

Received By:

Agency Representative

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