

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>Robin's Mini Mart</u>	DATE:	<u>2-8-12</u>
ADDRESS:	<u>130 W. Grandview Blvd. / Hanford</u>		
OWNER/OPERATOR	_____		
PHONE #:	LIC PLATE #:	PROGRAM:	<u>1613</u>

** Routine Inspection **

- Refrigeration unit was observed at 42°F - OK

- All pre-packaged products were observed stocked and displayed 6" above the floor.

① Replace bar soap and use liquid soap for hand washing.

[A large diagonal line is drawn across the page, likely indicating a correction or cancellation.]

Inspection Result - PASS

Inspector: *[Signature]*

Received by: *[Signature]*



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: ROBIN'S MINI MART	BUSINESS PHONE: (559) 584-4555	RECORD ID#: PR0003417	DATE: December 08, 2010
FACILITY SITE ADDRESS: 130 W GRANGEVILLE BLVD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: BALWINDER KAUR BRAR	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	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 MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

Description/Corrective Action: General housekeeping needs improvement, including walls, floors and equipment.

Please organize storage areas under microwave and beverage machines. To prevent pest infestation.

Restroom needs detail cleaning. Please provide soap, paper towels and toilet paper on dispenser.

Observed accumulation of dust debris on walk-in box fans and no covers on lights. Please clean fans and provide covers for lights.

General Comments:

Observed the walk-in box cooler was noted at 40° F.

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

Handwritten signature

Received By: _____

Kimberly Marquez

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: ROBIN'S MINI MART	BUSINESS PHONE: (559) 584-4555	RECORD ID#: PR0003417	DATE: December 23, 2009
FACILITY SITE ADDRESS: 130 W GRANGEVILLE BLVD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: BALWINDER KAUR BRAR	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: IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

Description/Corrective Action: Observed cappuccino nozzles with accumulation. Please clean nozzles on regular basis or as often as needed to prevent accumulation.

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

Description/Corrective Action: Handwash station did not have soap or paper towels available. Please provide soap and paper towels at all times.

Violation: RESTROOM FACILITIES NOT MAINTAINED [HSC 114250 & 114276]

Description/Corrective Action: Observed restroom without toilet paper, soap, and paper towels. Please provide toilet paper, soap, and paper towels for restroom.

General Comments:

Walk-in refrigerator was noted at 41°F.

Today's noted violations were also noted during last previous inspections as well. Please correct noted violations in timely manner to prevent further enforcements and/or administrative hearings.

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

Balwinder

Received By:

Susan Lee-Yang - REHS

Agency Representative

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