



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: SENIOR NUTRITION VIEW ROAD	BUSINESS PHONE: (559) 583-9258	RECORD ID#: PR0003561	DATE: April 06, 2012
FACILITY SITE ADDRESS: 602 9 1/4 AVE AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: KINGS COUNTY COMMISSION ON AGING	CERTIFIED FOOD HANDLER: MIRIAM SERPA	EXP DATE: 9/10/2016	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: None Noted

General Comments:

Food is delivered from Central Valley General Hospital.
Today's menu includes: tuna cheese lasagna (noted at 135° F), tomatoes, vegetables, fruits, and bread.
Hand wash station has hot water, soap, and paper towels.
Temperature logs are thorough and up-to-date.

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

Susan Lee-Yang - REHS

Received By:

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: SENIOR NUTRITION VIEW ROAD	BUSINESS PHONE: (559) 583-9258	RECORD ID#: PR0003561	DATE: March 31, 2011
FACILITY SITE ADDRESS: 602 9 1/4 AVE AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: KINGS COUNTY COMMISSION ON AGING	CERTIFIED FOOD HANDLER: STEVEN ALAN TROWBRIDGE	EXP DATE: 10/21/2014	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:

Food is delivered in hot boxes from Adventist Health.
Temperature logs taken everyday when food is received.
Today's menu: fish, potato, veggies & roll.
Hand washing station - Good.
Facility is well maintained.

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:
---	---

Steven Trowbridge

Received By: _____

Yatee Patel - REHS

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: SENIOR NUTRITION CENTER	BUSINESS PHONE: Not Specified	RECORD ID#: PR0003561	DATE: September 28, 2010
FACILITY SITE ADDRESS: 602 9 1/2 AVE 1/4	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ROSALIE DELAROSA	CERTIFIED FOOD HANDLER: STEVEN ALAN TROWBRIDGE	EXP DATE: 10/21/2014	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: None Noted

General Comments:

Today's menu: pot roast, potatoes, roll, salad, fruits, and milk.

Observed hand wash station stocked with soap and paper towels.

Observed temperature log thorough and complete.

Observed employees wearing hair nets and disposable gloves.

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:

Susan Lee-Yang

Received By: _____

Susan Lee-Yang - REHS

Agency Representative

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