



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: SMART & FINAL #376	BUSINESS PHONE: (323) 869-7725	RECORD ID#: PR0000634	DATE: December 09, 2010
FACILITY SITE ADDRESS: 888 E LACEY BLVD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: SMART & FINAL	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	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:

Overall, the food facility appeared in good operational condition.

All cold holding units measured satisfactory.

Facility is well organized.

Restrooms - OK.

Thank you.

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: _____

Yatee Patel - REHS
Agency Representative

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: SMART & FINAL #376	BUSINESS PHONE: (323) 869-7725	RECORD ID#: PR0000634	DATE: November 19, 2009
FACILITY SITE ADDRESS: 888 E LACEY BLVD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: SMART & FINAL	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	INSPECTOR: Veronica Santa Cruz

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: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: Observed many canned foods with dents. Seventeen canned foods were removed from the shelves by the manager during the inspection.

Please routinely check all canned food regularly, and remove those that are damaged.

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

Description/Corrective Action: Women's restroom currently does not have hot running water. Please correct the problem as soon as possible.

General Comments:

All cold holding units measured below 41°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): _____ N/A <input type="checkbox"/> Potential Food Safety All Star:

Veronica Santa Cruz

Received By: _____

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: SMART & FINAL #376	BUSINESS PHONE: (323) 869-7725	RECORD ID#: PR0000634	DATE: May 19, 2009
FACILITY SITE ADDRESS: 888 E LACEY BLVD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: SMART & FINAL	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	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:

- Overall, the food facility appeared in good operational condition.
- All cold food temperatures measured today were satisfactory.
- Be sure to check for excessive dented cans and discard or return to vendor.
- Women's bathroom was fully stocked with soap, paper towels & running water.
- Walk-in observed clean.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Received By: _____

Yatee Patel - REHS

Agency Representative

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