



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: T & A MOBIL MART & DELI	BUSINESS PHONE: (559) 582-2371	RECORD ID#: PR0000316	DATE: September 21, 2011
FACILITY SITE ADDRESS: 1685 N 10TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: THOMAS T & YECK MEI CHHAN	CERTIFIED FOOD HANDLER: THOMAS CHHAN	EXP DATE: 5/27/2015	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: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: Observed potatoes stored directly on the ground. All food products must be stored off the ground at a minimum of six inches. Observed raw eggs stored directly above ready-to-eat foods. Raw potentially hazardous foods must be stored away and below ready-to-eat foods.

Violation: IMPROPER CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]

Description/Corrective Action: Observed mildew accumulation on the inside of the large ice machine and soda nozzles. Please clean equipment on routine basis.

General Comments:

Cold holding units were noted at or below 41°F.
Hand wash station and restrooms had hot water, soap, and paper towels.
Chicken strips, burrito, and corn dog in hot holding unit were noted above 135°F.
Facility is well maintained.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: T & A MOBIL MART & DELI	BUSINESS PHONE: (559) 582-2371	RECORD ID#: PR0000316	DATE: March 30, 2011
FACILITY SITE ADDRESS: 1685 N 10TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: THOMAS T & YECK MEI CHHAN	CERTIFIED FOOD HANDLER: THOMAS CHHAN	EXP DATE: 5/27/2015	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: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: Be sure to separate raw meats from ready-to-eat foods in the reach-in.

General Comments:

Cold foods were all 41F or below.

Hot foods were all over 135° F with the exception of hamburgers. Operator prepared them 1- hr prior to inspection.
Discard within an hour or re-heat to 165° F.

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:
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Received By: _____

Yatee Patel - REHS

Agency Representative

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COUNTY OF KINGS

FOOD SAFETY EVALUATION REPORT

330 Campus Drive, Hanford, CA 93230 (559) 584-1411 (559) 584-6040 FAX
Keith Winkler, Director Internet: www.countyofkings.com/health/ehs/

Facility T & A MOBIL MART ID# PR0316 Type 1613 Insp. Code 001 Date 9/27/2010
Address 1685 N 10th AVE City HANFORD Zip 93230 In/Out /
Owner _____ Certified Food Handler THOMAS CHAN
Telephone # _____ Expiration Date 5/27/2015

Major Violation
Minor Violation
Not Observed
Not Applicable

* Major Violations must be corrected immediately.

COMMENTS

HOLDING / COOLING TEMPERATURES		
	Potentially hazardous foods (PHFs) are at or above 135°F [HSC 113995(a)]	* A BOWL AND CUP WERE OBSERVED TO BE IN THE HANDWASHING STATION LOCATED IN THE KITCHEN.
	Potentially hazardous foods (PHFs) are at or below 41°F [HSC 113995(b)]	
	Accurate thermometers are displayed in each refrigerator [HSC 113995(d)]	
	Frozen foods are thawed under cold running water, in a refrigerator, a microwave, or as part of the cooking process [HSC 114085]	
	Foods are cooled from 135°F to 41°F within 6 hours [HSC 114002]	
	PHFs are monitored with an accurate probe thermometer [HSC 113995(d)]	PLEASE ENSURE THAT HAND WASHING STATIONS ARE ONLY USED FOR HAND WASHING, AND FREE FROM UTENSILS AND/OR EQUIPMENT.
INTERNAL COOKING TEMPERATURES		
	Pork (whole meat) ≥145°F [HSC 113996(a)(3)]	
	Ground/chopped meats ≥157°F [HSC 113996(a)(1)]	
	Eggs and foods containing raw eggs ≥145°F [HSC 113996(a)(2)]	
	Poultry and/or meat stuffed items ≥165°F [HSC 113996(a)(4)]	* HOT AND COLD HOLDING UNIT TEMPERATURES WERE NOTED TO BE SATISFACTORY.
	Foods containing raw meat & prepared in a microwave oven ≥165°F [HSC 113996(b)]	
	Reheating of previously prepared foods for hot holding ≥165°F [HSC 113998(a)]	
FOOD HANDLER HYGIENE		
	Bare hand contact with ready-to-eat foods is minimized [HSC 114020(e)]	* RESTROOMS WERE STOCKED WITH SOAP, PAPER TOWELS AND HOT WATER.
	Proper, adequate handwashing is practiced [HSC 114020(c)]	
	Appropriate hygiene practices are followed [HSC 114020(b)]	
X	Handwashing facilities are accessible and maintained [HSC 114115]	
PROTECTION FROM CONTAMINATION		
	Work surfaces/equipment are appropriately sanitized [HSC 114090]	OVERALL, FACILITY WAS OBSERVED TO BE WELL MAINTAINED, ORGANIZED AND IN SATISFACTORY OPERATING CONDITION. PLEASE CONTINUE TO DO A GOOD JOB.
	Foods and equipment are protected from contamination [HSC 114080]	
	Backflow prevention is present where required [HSC 114095]	
FOODS FROM APPROVED SOURCES		
	[HSC 114003]	
	[HSC 114003]	THANK YOU!

Results of Evaluation PASS NEEDS IMPROVEMENT FAIL

Reinspection Date _____ One reinspection is conducted at no charge. A service fee is assessed for each additional reinspection required.

Evaluator GENE MORA II Received by [Signature]
[Signature]