



**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**

<b>FACILITY NAME:</b> TARGET STORE - T - 1906	<b>BUSINESS PHONE:</b> (559) 582-9298	<b>RECORD ID#:</b> PR0006544	<b>DATE:</b> April 12, 2012
<b>FACILITY SITE ADDRESS:</b> 140 N 12TH AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> TARGET STORE - T - 1906	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> 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:** SPOILED OR ADULTERATED FOOD PRODUCTS DISPLAYED [HSC 113980 & 114055]

**Description/Corrective Action:** Observed open flour and rice on the shelf of sales floor.  
 Ensure all packaged products are unopened.

Observed and removed one can of chili bean from shelf due to severe dent.

**General Comments:**

Observed restroom with hot water, soap, and paper towels.

Observed all food products stored on shelf.

All cold holding units were noted at or below 41°F.

Facility is clean and well organized.

<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:

Received By:

Susan Lee-Yang - REHS

Agency Representative

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



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<b>FACILITY NAME:</b> TARGET STORE - T - 1906	<b>BUSINESS PHONE:</b> (559) 582-9298	<b>RECORD ID#:</b> PR0006544	<b>DATE:</b> April 22, 2011
<b>FACILITY SITE ADDRESS:</b> 140 N 12TH AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> TARGET STORE - T - 1906	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> 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:

Observed general store area clean and well maintained.

Employee bathroom had hot water, soap, and paper towels.

All cold holding units were noted below 41°F.

Observed all food products stored on shelves.

Facility is in good operating condition.

RESULTS OF EVALUATION:  PASS  NEEDS IMPROVEMENT  FAIL

Reinspection Required: Yes:  No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

*NOTED*

Received By: \_\_\_\_\_

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FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> TARGET STORE - T - 1906	<b>BUSINESS PHONE:</b> (559) 582-9298	<b>RECORD ID#:</b> PR0006544	<b>DATE:</b> October 29, 2010
<b>FACILITY SITE ADDRESS:</b> 140 N 12TH AVE	<b>CITY:</b> HANFORD	<b>ZIP CODE:</b> 93230	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> TARGET STORE - T - 1906	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> 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:

Cold holding units were measured below 41F .

Restrooms were observed to be fully stocked with soap, paper towels and hot water.

Overall, facility was observed to be in satisfactory condition.

RESULTS OF EVALUATION:  PASS  NEEDS IMPROVEMENT  FAIL

Reinspection Required: Yes:  No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

*Walter B/S*

Received By:

*Susan Lee-Yang - REHS*

Agency Representative

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