



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: KETTLEMAN CITY SHELL	BUSINESS PHONE: (559) 277-2828	RECORD ID#: PR0000419	DATE: November 03, 2011
FACILITY SITE ADDRESS: 27512 WARD DR	CITY: KETTLEMAN CITY	ZIP CODE: 93239	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: CHASE INC/BOB SHIRALIAN	CERTIFIED FOOD HANDLER: Soheila L. Darcy	EXP DATE: 3/28/2014	INSPECTOR: Lee Johnson - 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 EXCLUSION OF VERMIN OR ANIMALS [HSC 114259-114259.3]

Description/Corrective Action: Rodent droppings were noted in the cabinets below the soda dispensers. Please clean and contact pest control company for service.

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

Description/Corrective Action: No soap was present at the three compartment sink. Soap was provided during inspection.

General Comments:

All cold temperatures checked today were satisfactory. No hot holding is occurring. The store is clean and well maintained.

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

Lee Johnson - 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: KETTLEMAN CITY SHELL	BUSINESS PHONE: (559) 277-2828	RECORD ID#: PR0000419	DATE: April 28, 2011
FACILITY SITE ADDRESS: 27512 WARD DR	CITY: KETTLEMAN CITY	ZIP CODE: 93239	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: CHASE INC/BOB SHIRALIAN	CERTIFIED FOOD HANDLER: Soheila L. Darcy	EXP DATE: 3/28/2014	INSPECTOR: Lee Johnson - 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 EXCLUSION OF VERMIN OR ANIMALS [HSC 114259-114259.3]

Description/Corrective Action: Four mouse droppings were noted in the cabinet below the soda fountain. These were cleaned by manager during inspection. Mountain View pest control visits every Monday. Please inform them of the dropping location at their next visit.

Violation: IMPROPER COLD HOLDING TEMPERATURE(S) [HSC 113996]

Description/Corrective Action: The walk in refrigerator measured 47F. Please adjust to maintain 41F or less at all times. Thermostat was adjusted during inspection by management.

General Comments:

No hot holding is occurring. The store was noted to be generally very clean and well maintained. 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): _____ N/A <input type="checkbox"/> Potential Food Safety All Star:

Maria Vazquez

Received By:

Lee Johnson - REHS

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: KETTLEMAN CITY SHELL	BUSINESS PHONE: (559) 277-2828	RECORD ID#: PR0000419	DATE: August 19, 2010
FACILITY SITE ADDRESS: 27512 WARD DR	CITY: KETTLEMAN CITY	ZIP CODE: 93239	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: CHASE INC/BOB SHIRALIAN	CERTIFIED FOOD HANDLER: Soheila L. Darcy	EXP DATE: 3/28/2014	INSPECTOR: Lee Johnson - REHS

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

Description/Corrective Action: Please insure that all soda syrup boxes are stored on racks or otherwise off the floor.

Violation: IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

Description/Corrective Action: Please sweep up numerous tiny dead bugs (not roaches) noted in the SE corner of the store.

Please finish repairs at the 3 compartment sink drain line so that all sinks are functional.

Please secure CO2 tanks with chains or remove.

General Comments:

The walk in measured <41 today. No hot holding is occurring. All hand wash stations were fully stocked. 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: _____

Lee Johnson - REHS

Agency Representative

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