



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

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|--|---|---------------------------------|---|
| FACILITY NAME: DOMINO'S PIZZA | BUSINESS PHONE: (559) 308-2327 | RECORD ID#: PR0005486 | DATE: December 20, 2011 |
| FACILITY SITE ADDRESS: 25 W D ST | CITY: LEMOORE | ZIP CODE: 93245 | INSPECTION TYPE: ROUTINE INSPECTION |
| OWNER NAME: T M T JR ENTERPRISES TOM MCGEE | CERTIFIED FOOD HANDLER: TOM MCGEE | EXP DATE: 8/30/2016 | INSPECTOR: Veronica Santa Cruz-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:

Had wash station were Stocked with soap, paper towels, and hot water.
Cold holding units measured at or below 41° F.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Veronica Santa Cruz-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: DOMINO'S PIZZA | BUSINESS PHONE: (559) 308-2327 | RECORD ID#: PR0005486 | DATE: July 13, 2011 |
| FACILITY SITE ADDRESS: 25 W D ST | CITY: LEMOORE | ZIP CODE: 93245 | INSPECTION TYPE: ROUTINE INSPECTION |
| OWNER NAME: T M T JR ENTERPRISES TOM MCGEE | CERTIFIED FOOD HANDLER: TOM MCGEE | EXP DATE: 5/9/2011 | INSPECTOR: Veronica Santa Cruz-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: NO CURRENT CERTIFIED FOOD SAFETY PERSON ON STAFF [HSC 113947-113947.6]

Description/Corrective Action: The facility's managers certified food handler is currently expired. Proof of an employee managers certification must be submitted to our department within 60 days.

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

Description/Corrective Action: The upper portion of the pizza prep line refrigeration unit measured between 43-44°F. Please adjust the unit so that the entire refrigerator unit measures at or below 41°F.

Violation: IMPROPER EXCLUSION OF VERMIN OR ANIMALS [HSC 114259-114259.3]

Description/Corrective Action: Numerous amounts of flies were observed during this inspection. Some type of fly control such as a fly curtain or uv fly trap should be installed in the facility to help control the amount of flies entering the facility.

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

Description/Corrective Action: Both of the facility's hand wash stations were not stocked with paper towels during this inspection. In order for employees to properly wash their hands, hand wash sinks must be stocked with soap and single use paper towels.

A permanently mounted soap dispenser has not been installed at the hand wash station near the food prep area. This violation was noted during the facility's last routine inspection.

General Comments:

The walk-in refrigeration unit measured at 41°F.

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

Thomas Adelt

Veronica Santa Cruz-REHS

Received By:

Agency Representative

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FOOD SAFETY EVALUATION REPORT

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|--|---|---------------------------------|---|
| FACILITY NAME: DOMINO'S PIZZA | BUSINESS PHONE: (559) 308-2327 | RECORD ID#: PR0005486 | DATE: November 10, 2010 |
| FACILITY SITE ADDRESS: 25 W D ST | CITY: LEMOORE | ZIP CODE: 93245 | INSPECTION TYPE: ROUTINE INSPECTION |
| OWNER NAME: T M T JR ENTERPRISES TOM MCGEE | CERTIFIED FOOD HANDLER: TOM MCGEE | EXP DATE: 5/9/2011 | INSPECTOR: Veronica Santa Cruz-REHS |

The items (if any) listed below identify the violation(s) that must be corrected. Thank you for your cooperation.
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Violation: IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

Description/Corrective Action: Please install a permanently mounted soap dispenser for the hand wash station.

Violation: IMPROPER FOOD HANDLING PRACTICES [HSC 113961 - 113973]

Description/Corrective Action: Observed operator handling food with acyclic nails and not wearing gloves. Any employee who has acrylic nails and/or a cut on the hands, food handler gloves must be worn.

General Comments:

Hand wash station and restrooms were stocked with soap, paper towels, and hot water.
 Cold holding units measured at 41°F.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Veronica Santa Cruz-REHS

Received By: _____

 Agency Representative

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