



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: LEMOORE HIGH SCHOOL	BUSINESS PHONE: (599) 925-4565	RECORD ID#: PR0000115	DATE: October 09, 2009
FACILITY SITE ADDRESS: 101 E BUSH ST	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: LEMOORE HIGH SCHOOL	CERTIFIED FOOD HANDLER: DEBRA R WENZEL	EXP DATE: 1/27/2012	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: IMPROPER COLD HOLDING TEMPERATURE(S) [HSC 113996]

Description/Corrective Action: The reach-in cold holding unit located by the entrance of the snack bar measured at an ambient temperature of 52° F. Please monitor unit and if unit is not at 41°F or below, have unit fixed and/or replaced.

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

Description/Corrective Action: Quat Sanitizer based dishwasher measured at 100 ppm. Quat sanitizer based dishwashers need to measure at 200 ppm. Please fix/replace dishwasher.

General Comments:

Facility had soap, paper towels, and hot water at the handwash station.
Facility also had up-to-date food temperature logs.
Until, the dishwasher is repaired, please wash the dishware manually in one of the three compartment sink.

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 checked="" type="checkbox"/> Potential Food Safety All Star:

Debra Wenzel

Received By: _____

Veronica Santa Cruz

Agency Representative

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: LEMOORE HIGH SCHOOL	BUSINESS PHONE: (599) 925-4565	RECORD ID#: PR0000115	DATE: April 28, 2009
FACILITY SITE ADDRESS: 101 E BUSH ST	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: LEMOORE HIGH SCHOOL	CERTIFIED FOOD HANDLER: DEBRA R. WENZEL	EXP DATE: 1/27/2012	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: IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

Description/Corrective Action: Observed light fixtures in the snack bar and exhaust hood to not have protective coverings. Please replace/repair light protective coverings.

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

Description/Corrective Action: Staff cold holding unit for salad bar measured at 50° F and reach-in cold holding unit measured at 48°F. These cold holding unit need to measure at or below 41°F.

General Comments:

All hot foods measured at or above 135°F and the hand wash station was stocked with soap and paper towels.

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 checked="" type="checkbox"/> Potential Food Safety All Star:

Received By:

Veronica Santa Cruz

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: LEMOORE HIGH SCHOOL	BUSINESS PHONE: (599) 925-4565	RECORD ID#: PR0000115	DATE: October 01, 2008
FACILITY SITE ADDRESS: 101 E BUSH ST	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: LEMOORE HIGH SCHOOL	CERTIFIED FOOD HANDLER: DEBRA R. WENZEL	EXP DATE: 1/27/2012	INSPECTOR: Susan Lee-Yang

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 ice scoops stored in ice.

Please make sure scoop is stored out of ice and in a clean container/surface.

General Comments:

- All hot foods were measured at or above 135°F.
- All cold storing units were measured at or below 41° F.
- Observed proper hand washing by employees.
- Observed employees wearing disposable gloves and hair restraints.
- Temperature logs are up-to-date.
- Overall, facility is in good operating condition.

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 checked="" type="checkbox"/> Potential Food Safety All Star:

Received By: _____

Susan Lee-Yang

Environmental Health Specialist

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