



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> LEMOORE SHELL	<b>BUSINESS PHONE:</b> (559) 924-7117	<b>RECORD ID#:</b> PR0005237	<b>DATE:</b> May 22, 2009
<b>FACILITY SITE ADDRESS:</b> 1790 W BUSH ST	<b>CITY:</b> LEMOORE	<b>ZIP CODE:</b> 93245	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> GOLDEN GATE PETROLEUM	<b>CERTIFIED FOOD HANDLER:</b> BALRAJ PUREWAL	<b>EXP DATE:</b> 10/29/2011	<b>INSPECTOR:</b> 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:** SPOILED OR ADULTERATED FOOD PRODUCTS DISPLAYED [HSC 113980 & 114055]

**Description/Corrective Action:** Due to air conditioning unit not working, observed chocolate candy bars melted. Please continue removing melted candy bars off the shelves and/or fix air conditioning unit to stop the melting of the candy bars.

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

**Description/Corrective Action:** Observed cappuccino machine nozzles and coffee creamer nozzles to have buildup. Please routinely clean nozzles to prevent buildup.

Observed all floor drains within the facility to have accumulated debris. Please routinely clean floor drains.

Observed the protective light covering in the walk-in freezer missing. Please place a protective covering on the light fixture.

**General Comments:**

All cold holding units measured at 41°F or below.  
Restrooms were maintained with soap, paper towels, and hot water.

<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:

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

<b>FACILITY NAME:</b> LEMOORE SHELL	<b>BUSINESS PHONE:</b> (559) 924-7110	<b>RECORD ID#:</b> PR0005237	<b>DATE:</b> May 12, 2008
<b>FACILITY SITE ADDRESS:</b> 1790 W BUSH ST	<b>CITY:</b> LEMOORE	<b>ZIP CODE:</b> 93245	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> GOLDEN GATE PETROLEUM	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b> 6/6/2003	<b>INSPECTOR:</b> Susan Lee

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 soda nozzles with syrup build-up and cream n' sugar station with sugar and cream build-up.  
Please clean nozzles as often as needed to prevent build-up.

**General Comments:**  
Both restrooms were stocked with soap and paper towels.  
Measured reach-in unit storing milk and eggs at 40°F.  
Overall, the facility appeared in satisfactory operational condition.

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

*Sandra DeSera*

Signature:

*Susan Lee*

Environmental Health Officer

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### FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> LEMOORE SHELL	<b>BUSINESS PHONE:</b> (559) 924-7110	<b>RECORD ID#:</b> PR0005237	<b>DATE:</b> January 10, 2007
<b>FACILITY SITE ADDRESS:</b> 1790 W BUSH ST	<b>CITY:</b> LEMOORE	<b>ZIP CODE:</b> 93245	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> GOLDEN GATE PETROLEUM	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> Liliana Stransky

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 CLEANING OF UTENSILS AND EQUIPMENT [HSC 114090]  
**Description/Corrective Action:** Clean out refrigeration unit next to cappuccino machine. Excess condensation was observed at the bottom.

**General Comments:**  
Overall, the facility was observed in satisfactory condition.  
Thank you!

<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> N/A <input type="checkbox"/> Potential Food Safety All Star:
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*Carmen H... [Signature]*  
Signature: \_\_\_\_\_

*Liliana Stransky*  
Environmental Health Officer

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