



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: ME-N-ED'S PIZZA	BUSINESS PHONE: (559) 924-3484	RECORD ID#: PR0000244	DATE: March 04, 2010
FACILITY SITE ADDRESS: 1290 N LEMOORE AVE	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: JOHN A. FERDINANDI	CERTIFIED FOOD HANDLER: DONNA KISER	EXP DATE: 11/10/2010	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: IMPROPER USE OR STORAGE OF TOXIC MATERIALS [HSC 114254-114254.3]

Description/Corrective Action: Observed chemicals, Ajax, being stored on top of the handwash station nozzles. All chemicals need to be stored in an area away from food prep or food storage.

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

Description/Corrective Action: Observed dishware in the handwash station. All dishware needs to be placed in the three compartment sink so they may get washed there.

General Comments:

Handwash station and womens restroom were stocked with soap, paper towels, and hot water.
Cold holding units measured below 41°F .
Items at the salad bar measured at 41°F.
Quat sanitizer at the three compartment sink measured at 200 ppm.

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:

Dustin Hamilton

Received By:

Veronica Santa Cruz-REHS

Agency Representative

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: ME-N-ED'S PIZZA	BUSINESS PHONE: (559) 924-3484	RECORD ID#: PR0000244	DATE: August 17, 2009
FACILITY SITE ADDRESS: 1290 N LEMOORE AVE	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: JOHN A. FERDINANDI	CERTIFIED FOOD HANDLER: DONNA KISER	EXP DATE: 11/10/2010	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 floor drains by the three compartment sink filled with debris. Observed shelves in the pizza prep area filled with debris. Please routinely clean floor drains, floors, and shelves.

Violation: IMPROPER USE OR STORAGE OF TOXIC MATERIALS [HSC 114254-114254.3]

Description/Corrective Action: Observed spray cleaning solution next to prep area of the pizzas. This violation was noted on the last inspection report. Please store all cleaning solutions away from the prep area.

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

Description/Corrective Action: Potato and macaroni salads at the salad bar measured at 49° F. The unit was turned up by the manager on-site of the inspection. The unit was re-checked after manager turned down the unit, and the unit re-measured at 47° F.

General Comments:

Walk-in unit measured at 41° F.
Hendwash station and restrooms were stocked with soap, paper towels, and hot water.

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:

Donna Kiser

Received By: _____

Veronica Santa Cruz

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: ME-N-ED'S PIZZA	BUSINESS PHONE: (559) 924-3484	RECORD ID#: PR0000244	DATE: February 26, 2009
FACILITY SITE ADDRESS: 1290 N LEMOORE AVE	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: JOHN A. FERDINANDI	CERTIFIED FOOD HANDLER: DONNA KISER	EXP DATE: 11/10/2010	INSPECTOR: 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: IMPROPER USE OR STORAGE OF TOXIC MATERIALS [HSC 114254-114254.3]

Description/Corrective Action: Observed three chemical spray bottles stored by food products. All chemicals must be stored away from all food and food products at all times.

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

Description/Corrective Action: Observed soda nozzles with syrup build-up. Please clean nozzles regularly or as often as needed to prevent build-up.

QUAT sanitizer in three compartment sink measured 100 ppm. QUAT sanitizer must maintain a minimum concentration of 200 ppm.

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

Description/Corrective Action: Observed walk-in and reach-in refrigerators with excessive food debris. Please thoroughly clean all equipments regularly.

General Comments:

Observed hand wash station and restroom fully stocked with soap and paper towels.

All cold holding units measured below 41°F.

Facility needs to maintain regular cleaning of all equipments.

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

Donna Kiser

Susan Lee-Yang - REHS

Received By:

Agency Representative

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