



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: MEDINA'S KITCHEN	BUSINESS PHONE: (559) 924-9163	RECORD ID#: PR0000462	DATE: February 09, 2010
FACILITY SITE ADDRESS: 329 FOX ST	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: JORGE MEDINA	CERTIFIED FOOD HANDLER: JORGE L. MEDINA	EXP DATE: 2/23/2011	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: IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

Description/Corrective Action: The protective covering for the light located on the hood is missing. Please replace protective covering.

General Comments:

Handwash station and restroom were stocked with soap, paper towels, and hot water.
Cold holding units measured at or below 41°F.
Meat on the steam table measured at 167° F and beans on the steam table measured at 154°F.

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: _____

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: MEDINA'S KITCHEN	BUSINESS PHONE: (559) 924-9163	RECORD ID#: PR0000462	DATE: August 26, 2009
FACILITY SITE ADDRESS: 329 FOX ST	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: JORGE MEDINA	CERTIFIED FOOD HANDLER: JORGE MEDINA	EXP DATE: 9/25/2009	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: None Noted

General Comments:

Beans on the steam table measured at 168° F.
Cold holding units measured at satisfactory temperatures.
Handwash sink was stocked with soap, paper towels, and hot water.

Just as a reminder, facilities certified foodhandler will be expiring in September. Please fax, mail, or stop by our department to give us a copy of a valid certification when one has been obtained.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Received By:

Veronica Santa Cruz

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: MEDINA'S KITCHEN	BUSINESS PHONE: (559) 924-9163	RECORD ID#: PR0000462	DATE: February 05, 2009
FACILITY SITE ADDRESS: 329 FOX ST	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: JORGE MEDINA	CERTIFIED FOOD HANDLER: JORGE MEDINA	EXP DATE: 9/25/2009	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: None Noted

General Comments:

All cold holding units measured at or below 41°F. Foods (beans and potatoes) on the steam table measured at or above 135° F. Overall, facility is in good operating condition.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Susan Lee-Yang - REHS

Agency Representative

Received By:

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