



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: QUICK-&-EZ	BUSINESS PHONE: (559) 924-1400	RECORD ID#: PR0006484	DATE: September 07, 2011
FACILITY SITE ADDRESS: 150 E HANFORD/ARMONA RD	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: PALWINDER S SIDHU	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	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: RESTROOM FACILITIES NOT MAINTAINED [HSC 114250 & 114276]

Description/Corrective Action: Observed the facility's toilet and hand wash sink in need of routine cleaning.

General Comments:

Cold holding unit storing potentially hazardous foods measured well below 41°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): N/A <input type="checkbox"/> Potential Food Safety All Star:
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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: QUICK-&-EZ	BUSINESS PHONE: (559) 924-1400	RECORD ID#: PR0006484	DATE: June 28, 2010
FACILITY SITE ADDRESS: 150 E HANFORD/ARMONA RD	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: PALWINDER S SIDHU	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	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:

Cold holding unit storing pre-packaged sandwiches and milk measured at 41° F.
Ice machine was observed in satisfactory condition.
Facility only sells pre-packaged food items.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: QUICK-&-EZ	BUSINESS PHONE: (559) 924-4591	RECORD ID#: PR0006484	DATE: May 08, 2009
FACILITY SITE ADDRESS: 150 E HANFORD/ARMONA RD	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: PALWINDER S SIDHU	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	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:

Cold holding unit storing sandwiches, milk, and cheese measured at 37°F.

Observed restroom fully stocked with soap and paper towels.

Facility is well maintained and 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 type="checkbox"/> Potential Food Safety All Star:

Received By: _____

Susan Lee-Yang - REHS

Agency Representative

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