



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> A & M MARKET	<b>BUSINESS PHONE:</b> (559) 947-3313	<b>RECORD ID#:</b> PR0000377	<b>DATE:</b> December 21, 2009
<b>FACILITY SITE ADDRESS:</b> 20510 MAIN ST	<b>CITY:</b> STRATFORD	<b>ZIP CODE:</b> 93266	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> MAHMUD A ALRAHIMI	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> Lee Johnson - 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:** Please repair the slow drain at the restroom sink.

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

**Description/Corrective Action:** Please remove accumulated boxes from the walk in. Also remove all debris and unused equipment from the store. The store is in need of general and regular cleaning.

**General Comments:**

Pre packaged food sales only. No hot holding is occurring or permitted.

Thank you.

**RESULTS OF EVALUATION:**  PASS  NEEDS IMPROVEMENT  FAIL

**Reinspection Required:** Yes:  No:

**Reinspection Date (on or after):** N/A

Potential Food Safety All Star:

Lee Johnson - REHS

Received By: \_\_\_\_\_

Agency Representative

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



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<b>FACILITY NAME:</b> A & M MARKET	<b>BUSINESS PHONE:</b> (559) 947-3313	<b>RECORD ID#:</b> PR0000377	<b>DATE:</b> May 14, 2009
<b>FACILITY SITE ADDRESS:</b> 20510 MAIN ST	<b>CITY:</b> STRATFORD	<b>ZIP CODE:</b> 93266	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> MAHMUD A ALRAHIMI	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> Lee Johnson - 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 COLD HOLDING TEMPERATURE(S) [HSC 113996]

**Description/Corrective Action:** Walk-in measured 45F. Please adjust to maintain 41 or less at all times.

**General Comments:**

No hot holding is occurring. Sink is stocked with liquid soap, paper towels and hot water.

**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:

Lee Johnson - REHS

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<b>FACILITY NAME:</b> A & M MARKET	<b>BUSINESS PHONE:</b> (559) 947-3313	<b>RECORD ID#:</b> PR0000377	<b>DATE:</b> December 08, 2008
<b>FACILITY SITE ADDRESS:</b> 20510 MAIN ST	<b>CITY:</b> STRATFORD	<b>ZIP CODE:</b> 93266	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> MAHMUD A ALRAHIMI	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> Lee Johnson

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**Violation:** IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]  
**Description/Corrective Action:** Please repair deteriorated wall covering behind 2 compartment sink.

General Comments:

No food prep is occurring. Cold temperature checked OK.

<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:

Lee Johnson

Received By:

Environmental Health Specialist

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