



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> ARMONA UNION ACADEMY	<b>BUSINESS PHONE:</b> (559) 582-4468Ext. 10	<b>RECORD ID#:</b> PR0000280	<b>DATE:</b> September 09, 2009
<b>FACILITY SITE ADDRESS:</b> 14435 LOCUST ST	<b>CITY:</b> ARMONA	<b>ZIP CODE:</b> 93202	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> ARMONA UNION ACADEMY	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> 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 MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

**Description/Corrective Action:** Observed hood baffles still missing. Please replace hood baffles.  
This violation was noted during the last routine inspection as well.

Observed pipes beneath kitchen sink leaking water.  
Please repair/replace pipe.

**General Comments:**

Observed handwash station fully stocked with soap and paper towels.

Reach-in refrigerator was noted at 41°F.

Please correct all noted violations in a timely manner to prevent further re-inspections and/or administrative enforcements.

<b>RESULTS OF EVALUATION:</b> <input type="checkbox"/> PASS <input checked="" 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:

*Left at office*

*Susan Lee-Yang - REHS*

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

Agency Representative

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



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> ARMONA UNION ACADEMY	<b>BUSINESS PHONE:</b> (559) 582-4468	<b>RECORD ID#:</b> PR0000280	<b>DATE:</b> March 03, 2009
<b>FACILITY SITE ADDRESS:</b> 14435 LOCUST ST	<b>CITY:</b> ARMONA	<b>ZIP CODE:</b> 93202	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> ARMONA UNION ACADEMY	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> 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 MAINTENANCE OF FACILITY OR EQUIPMENT [HSC 114161-114182 & 114257]

**Description/Corrective Action:** Observed hood filters missing.

Even though facility does not cook on-site, the kitchen is rented out to local organizations to use kitchen to cook.

Please replace missing fitters before use.

**General Comments:**

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

Reach-in refrigerator measured at 41°F.

No food products are prepared or cooked on-site.

Food are brought in from outside the facility and served to students.

<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:

Susan Lee-Yang - REHS

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

Agency Representative

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



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> ARMONA UNION ACADEMY	<b>BUSINESS PHONE:</b> (559) 582-4468	<b>RECORD ID#:</b> PR0000280	<b>DATE:</b> June 02, 2008
<b>FACILITY SITE ADDRESS:</b> 14435 LOCUST ST	<b>CITY:</b> ARMONA	<b>ZIP CODE:</b> 93202	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> ARMONA UNION ACADEMY	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<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:** None Noted

**Description/Corrective Action:**

**General Comments:**

All hand wash facilities were stocked with soap and paper towels.

Currently, no food preparation is being prepared on site.

Food is ordered in from town.

<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:

*A. R. Lee*

Signature: \_\_\_\_\_

*Susan Lee*

Environmental Health Officer

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