



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> BUFORD STAR MART #2	<b>BUSINESS PHONE:</b> (559) 582-7296	<b>RECORD ID#:</b> PR0003727	<b>DATE:</b> May 21, 2009
<b>FACILITY SITE ADDRESS:</b> 10818 14TH AVE	<b>CITY:</b> ARMONA	<b>ZIP CODE:</b> 93202	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> SAFWAN ALI SHAIE	<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:** RESTROOM FACILITIES NOT MAINTAINED [HSC 114250 & 114276]

**Description/Corrective Action:** Observed toilet in restroom dirty and unsanitary. Please clear/ scrub toilet more often to prevent build-up.

**Violation:** SPOILED OR ADULTERATED FOOD PRODUCTS DISPLAYED [HSC 113980 & 114055]

**Description/Corrective Action:** Observed and removed one 29 1/2 oz can of Juanita's Menudo and one 15 oz can of Dennison's Chunky Chili due to cans being dented.

Please remove any dented and bloated cans off shelves.

**General Comments:**

All cold holding units measured at or below 41°F.

Observed hot water, soap, and paper towels present at all hand wash stations.

Facility needs to maintain restroom in sanitary condition.

<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



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### FOOD SAFETY EVALUATION REPORT

<b>FACILITY NAME:</b> BUFORD STAR MART #2	<b>BUSINESS PHONE:</b> (559) 582-7296	<b>RECORD ID#:</b> PR0003727	<b>DATE:</b> May 08, 2008
<b>FACILITY SITE ADDRESS:</b> 10818 14TH AVE	<b>CITY:</b> ARMONA	<b>ZIP CODE:</b> 93202	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> SAFWAN ALI SHAIE	<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:** SPOILED OR ADULTERATED FOOD PRODUCTS DISPLAYED [HSC 113980 & 114055]  
**Description/Corrective Action:** Observed and removed seven (16 oz.) bags of Best Yet Enriched Rice and five (48 oz.) bags of Best Yet Spaghetti Noodles with presence of insects off the shelf.
- Violation:** RESTROOM FACILITIES NOT MAINTAINED [HSC 114250 & 114276]  
**Description/Corrective Action:** Observed vent in restroom not operating.  
Please repair/replace vent.
- 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 once a week or often as needed to prevent build-up.

**General Comments:**

All cold food temperatures measured today were satisfactory.  
The reach-in unit storing sandwiches, cheese, ham, eggs, and milk was measured at 38° F.

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

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

*Susan Lee*  
\_\_\_\_\_  
Environmental Health Officer

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**FOOD SAFETY EVALUATION REPORT**

<b>FACILITY NAME:</b> BUFORD STAR MART #2	<b>BUSINESS PHONE:</b> (559) 582-7296	<b>RECORD ID#:</b> PR0003727	<b>DATE:</b> August 10, 2007
<b>FACILITY SITE ADDRESS:</b> 10818 14TH AVE	<b>CITY:</b> ARMONA	<b>ZIP CODE:</b> 93202	<b>INSPECTION TYPE:</b> ROUTINE INSPECTION
<b>OWNER NAME:</b> SAFWAN ALI SHAIE	<b>CERTIFIED FOOD HANDLER:</b> Not Specified	<b>EXP DATE:</b>	<b>INSPECTOR:</b> Raymond Cooke

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 HANDWASH FACILITIES [HSC 113953 - 113593.2]

**Description/Corrective Action:** Discontinue storing gas blower on hand wash sink. Maintain sink clear at all times.

**Violation:** IMPROPER PLUMBING OR LIQUID WASTE DISPOSAL [HSC 114189-114242]

**Description/Corrective Action:** Maintain toilet in back storeroom clear so that water can be maintained in it. It is recommended that the toilet be removed and all waste lines properly capped.

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

**Description/Corrective Action:** Maintain the chain around the CO2 tanks next to the soda machine.

**General Comments:**

It is recommended that the thermometer in the milk and sandwich refrigerator be relocated so that it is easier to see.

All cold temperatures were good.

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

*Safwan Ali Shaie*

Signature:

*Raymond Cooke*

Environmental Health Officer

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