



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: AMIGO'S MINI MART	BUSINESS PHONE: (559) 386-4679	RECORD ID#: PR0000434	DATE: November 08, 2011
FACILITY SITE ADDRESS: 301 KINGS	CITY: AVENAL	ZIP CODE: 93204	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ADNAN OBAID	CERTIFIED FOOD HANDLER: SALEEM MEFTAH	EXP DATE: 4/26/2011	INSPECTOR: 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 MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

Description/Corrective Action: Soap and paper towels were provided to restroom during inspection. Please provide liquid hand soap and paper towels to 3 compartment sink as well.

Violation: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: Water was turned off at the ice cream dipper well. Please insure water is running during operation (operator cleaned dipper well during inspection and started water flow).

The microwave is in need of cleaning. Please clean regularly.

General Comments:

Please secure CO2 tanks to prevent tip over.

All cold temperatures checked today were satisfactory. No hot holding is occurring. Only food prep is ice cream service.

The owners of this store are purchasing the former Beverage Hut across the street. The Beverage Hut has reportedly been closed since September. The new owners plan to convert the store to a 99 cent store (no food preparation, sales of prepackaged foods only). Please contact our office prior to opening to obtain a new food vending permit for that store under your name.

Please contact our office if you have any questions.

Thank you.

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: _____

Lee Johnson - 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: AMIGO'S MINI MART	BUSINESS PHONE: (559) 386-4679	RECORD ID#: PR0000434	DATE: April 27, 2011
FACILITY SITE ADDRESS: 301 KINGS	CITY: AVENAL	ZIP CODE: 93204	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ADNAN OBAID	CERTIFIED FOOD HANDLER: SALEEM MEFTAH	EXP DATE: 4/26/2011	INSPECTOR: Raymond Cooke - 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 CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]

Description/Corrective Action: Mold growth was noted in ice cream dipper well. Sanitize and maintain clean.

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

Description/Corrective Action: Brigdeford sandwiches were noted to be two weeks past sell by date. manager removed items from sale.

Violation: IMPROPER MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

Description/Corrective Action: Maintain paper towels at three compartment sink and at restroom sink.

General Comments:

All cold temperatures were OK.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Raymond Cooke - REHS

Received By: _____

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: AMIGO'S MINI MART	BUSINESS PHONE: (559) 386-4679	RECORD ID#: PR0000434	DATE: October 05, 2010
FACILITY SITE ADDRESS: 301 KINGS	CITY: AVENAL	ZIP CODE: 93204	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ADNAN OBAID	CERTIFIED FOOD HANDLER: SALEEM MEFTAH	EXP DATE: 4/26/2011	INSPECTOR: Troy Hommerding-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: CO2 cylinders in the back room are not properly secured. Please secure these gas cylinders.

Three-compartment and hand wash sink area need to be clean. Numerous cans and other items are cluttered in the area blocking the hand wash sink.

Violation: RESTROOM FACILITIES NOT MAINTAINED [HSC 114250 & 114276]

Description/Corrective Action: Restroom does not have soap or paper towels for handwashing, please provide soap and paper towels for handwashing.

General Comments:

All cold holding temperatures were at the proper regulatory requirements.

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

Troy Hommerding-REHS

Received By:

Agency Representative

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