



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: BEST MART	BUSINESS PHONE: (559) 386-0562	RECORD ID#: PR0006275	DATE: November 04, 2009
FACILITY SITE ADDRESS: 121 KING ST	CITY: AVENAL	ZIP CODE: 93204	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: WASIL ABDUL QUDUS	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	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: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: Please clean and sanitize soda dispenser nozzles to remove debris.

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

Description/Corrective Action: Please provide paper towels to restroom sink.

General Comments:

No food preparation is permitted or occurring at this facility. Cold temps were satisfactory.

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:

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: BEST MART	BUSINESS PHONE: (559) 386-0562	RECORD ID#: PR0006275	DATE: May 19, 2009
FACILITY SITE ADDRESS: 121 KING ST	CITY: AVENAL	ZIP CODE: 93204	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: WASIL ABDUL QUDUS	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	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: Newly installed soda machine drain line is draining liquid waste onto the ground outside the building, please repair the drain line.

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

Description/Corrective Action: 15 cans of Juanita's Ready to Serve Mole were removed from the sales floor. Cans were noted bloated.

General Comments:

Cold holding temperature were measured at the proper regulatory requirements.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Troy Hommerding-REHS

Received By:

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: BEST MART	BUSINESS PHONE: (559) 386-0562	RECORD ID#: PR0006275	DATE: October 27, 2008
FACILITY SITE ADDRESS: 121 KING ST	CITY: AVENAL	ZIP CODE: 93204	INSPECTION TYPE: 2ND+ FOLLOWUP INSPECTION
OWNER NAME: WASIL ABDUL QUDUS	CERTIFIED FOOD HANDLER: Not Specified	EXP DATE:	INSPECTOR: Troy Hommerding

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:

Violations from the previous reinspection have been corrected. No bloated or Leaking canned items were observed today. The two compartment wash Sink faucet has been repaired. Waste Tires and other debris have been removed from the back of the Store. However, the waste receipt produced as proof of disposal is disingenuous. This was verified by an Avenal Regional Landfill employee. The store operator stated he paid Miguel (sic) Preciado to dispose of the waste. the store operator tried to contact this person by phone; However, when contacted and asked to come to the store, this person failed to show up.

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:

SP/JP

Troy Hommerding

Received By: _____

Environmental Health Specialist

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