



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: REEF-SUNSET MIDDLE SCHOOL	BUSINESS PHONE: (559) 386-9083Ext. 3063	RECORD ID#: PR0000565	DATE: March 02, 2010
FACILITY SITE ADDRESS: 608 N FIRST ST	CITY: AVENAL	ZIP CODE: 93204	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: REEF-SUNSET USD	CERTIFIED FOOD HANDLER: CONNIE SIGALA	EXP DATE: 12/6/2011	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 CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]

Description/Corrective Action: Hobart chopper was noted with liquid in the rotating bowl. After talking with an employee, they stated the ceiling above was leaking rain water. They stated the ceiling has been repaired. Please clean and sanitize this piece of equipment and the surrounding area.

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

Description/Corrective Action: Walk in refrigeration unit still lacks the required protective shatter proof covering for the light, this was noted on the previous inspection report. Please provide the shatter proof protective light covering for the light in the walk in refrigeration unit.

General Comments:

All cold holding temperatures were measured at or below 41°F. All student helpers today were shown the proper hand washing technique.

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

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



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: REEF-SUNSET MIDDLE SCHOOL	BUSINESS PHONE: (559) 386-9083Ext. 3063	RECORD ID#: PR0000565	DATE: September 22, 2009
FACILITY SITE ADDRESS: 608 N FIRST ST	CITY: AVENAL	ZIP CODE: 93204	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: REEF-SUNSET USD	CERTIFIED FOOD HANDLER: CONNIE SIGALA	EXP DATE: 12/6/2011	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: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: The light bulb in the walk in refrigerator lacks a cover. Please install.

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

Description/Corrective Action: Please repair the door on the Traulsen Hot Box so that it fully closes and seals.

General Comments:

Because the garbage disposer does not work, the dish washing machine is no longer used at this facility. All dish washing occurs at the dedicated three compartment sink.

All hot and cold holding temperatures were satisfactory. The facility is clean and, except as noted above, well-maintained. Temps are documented daily.

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 checked="" type="checkbox"/> Potential Food Safety All Star:

Received By: _____

Lee Johnson - REHS

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: REEF-SUNSET MIDDLE SCHOOL	BUSINESS PHONE: (559) 386-9083Ext. 3063	RECORD ID#: PR0000565	DATE: March 20, 2009
FACILITY SITE ADDRESS: 608 N FIRST ST	CITY: AVENAL	ZIP CODE: 93204	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: REEF-SUNSET USD	CERTIFIED FOOD HANDLER: CONNIE SIGALA	EXP DATE: 12/6/2011	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: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION [HSC 113980, 114025-114027]

Description/Corrective Action: Meat slicer was noted with accumulated debris. Please clean thoroughly on a regular basis.

Please provide light bulb cover to walk-in refrigerator.

General Comments:

All hot and cold temperatures checked today were satisfactory. Temperatures are logged daily with digital probe thermometer. 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 checked="" type="checkbox"/> Potential Food Safety All Star:

Connie Sigala

Received By: _____

Lee Johnson - REHS

Agency Representative

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