

# **Restaurant Bakery Permit Inspection Report**

Kings County Department of Public Health
Environmental Health Services
330 Campus Dr. Hanford CA 93230
Phone - 559-584-1411 Fax - 559-584-6040

Internet - www.countyofkings.com/health/ehs

# INSPECTION REPORT FOOD VENDING PERMIT - GR3 (100-250)

Facility Name Facility		Facility Address			City/State			Zip Code
MICKY'S BAR & GRILL 230 FG		DX ST			LEMOORE, CA			93245
Owner/Operator		Facility Phone No.	Inspecti	nspection ID		Inspection Result		
CHARLES KRANTZ		5596338064	36377	36377		Needs Improvement		
Inspector Name	Inspection Date	Purpose of Inspection	Permit License		e	Expiration Date		
Chaitanya Patel	5/7/2024	outine Inspection PR00		PR0000401		4/1/2	2025	

An inspection of your facility revealed the following violations of the California Health and Safety Code and/or California Code of Regulations. A reinspection may occur at any time to verify correction of these violations. Please note the date of correction as listed per violation.

NVO = No Violation Observed OUT = Out of Compliance N/A = Not Applicable COS = Corrected On Site UD = UD

Violation Status	Violation Code	Observation	
	FDA Food Code 2017		
	55 - PHYSICAL FACILITIES - Physical facilities installed, maintained, and clean		

The ventilation hood over the cooking area is in need of a deep cleanse. Multiple grease stained areas noted on the ventilation hood. There is also a leak in the grease pan which is leading to grease leaking onto kitchen floor not over the cooking area.

Fix the grewal e pan leak and clean the ventilation hood.

### **Overall Inspection Comment:**

Routine Inspection was conducted and following was noted

Facilty has a bar area seperate from the kitchen area. Kictchen area is open for food prep and serving in the bar area.

Hot water temperature at the dishwash sink which doubles as handwashing area noted to be above 120F. Soap and paper towels were also present in this area.

Multiple reach in Refrigeration units noted below 41F. The walk in also noted below 41F.

All items were stored at least 6 inches above ground in dry storage areas.

General cleanliness is in unsatisfactory condition. Ventilation hood noted with major grease buildup. Grease build up also noted along the walls of the cooking area underneath the ventilation hood.

Food handker certification active and present on site. Food manager certification is required for raid facility as there is food preparation occurring. Submit to EHS within 30 days of this inspection.

ATTENTION: There are a total of 1 item(s) marked above in violation. Total Major violations are 0.



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# Received By: Inspected By: Inspector Name: Chaitanya Patel Title: Environmental Health Officer I Date: 5/7/2024 Phone: 559-584-1411 Email: Chaitanya.Patel@co.kings.ca.us



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### **FOOD SAFETY EVALUATION REPORT**

FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:
MICKY'S BAR & GRILL	Not Specified	PR0000401	January 27, 2022
FACILITY SITE ADDRESS: 230 FOX ST	CITY: LEMOORE	<b>ZIP CODE</b> : 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME:	CERTIFIED FOOD MANAGER:	<b>EXP DATE:</b> 9/20/2024	INSPECTOR:
CHARLES KRANTZ	ELTON GRAY		Veronica Ochoa -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:** 

The facility's mechanical dishwasher was recently vandalized and as a result was not functional during today's inspection. The owner of the facility indicated that a service company has been called to repair the unit. Please ensure that the chlorine level after the final rinse cycle measures at 50 ppm.

Violation: IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT

[HSC 114161-114182 & 114257]

**Description/Corrective Action:** 

The facility's hood is in need of service as an excessive amount of grease was observed on the hood baffles. The owner of the facility indicated that the facility will be having the hood serviced next week. Please ensure a service sticker is placed on the hood after the service has been completed.

The reach-in freezer currently has a bucket that is being utilized as a condensate pan. Please have the unit repaired so that the bucket is no longer needed to catch condensate. At the time of the inspection, the food items in the freezer were frozen.

Violation: IMPROPER MAINTENANCE OF HANDWASH FACILITIES

IHSC 113953 - 113593.2

**Description/Corrective Action:** 

The hand wash sink in the kitchen area was not equipped with paper towels at the beginning of the inspection. Also, the hand wash stations in the restrooms were not equipped with hot water. Please ensure all hand wash stations are stocked with soap, paper towels, and hot water.

### **General Comments:**

During today's inspection, it was mentioned that the current owner of the facility, Charles Krantz, recently hired Elton Gray to run the facility's kitchen. It was also mentioned that the facility is currently for sale. As a reminder, should the facility change ownership, the facility would need to undergo some remodeling of the kitchen as the facility would no longer be "grandfathered in." At a minimum, a hand wash sink and proper coved flooring would have to be installed in the kitchen should a new owner take over. Prior to any construction taking place, construction plans would have to be submitted and approved by this department. Please remember to notify this department of a change in ownership.

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

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		Reinspection Re	equired: Yes: No: X		
RESULTS OF EVALUATION: PASS X NEED	DS IMPROVEMENT FAIL	FAIL Reinspection Date (on or after):			
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