

Environmental Health Serivces Division 330 Campus Drive Hanford, CA 93230 Phone - 559-584-1411 Fax - 559-584-6040

Internet - www.countyofkings.com/ehs

FOOD SAFETY EVALUATION REPORT

FACILITY NAME: DELI DELICIOUS #31	BUSINESS PHONE: (559) 393-8889	RECORD ID#: PR0011113	DATE: February 10, 2022
FACILITY SITE ADDRESS: 855 N LEMOORE AVE STE 100	CITY: LEMOORE	ZIP CODE : 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: HESAM HOBAB	CERTIFIED FOOD MANAGER: Alyssa Soares	EXP DATE: 9/9/2026	INSPECTOR: 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 MAINTENANCE OF FACILITY OR EQUIPMENT

[HSC 114161-114182 & 114257]

Description/Corrective Action: The facility's flooring throughout the kitchen area is need of having the floor resealed.

The sealant that was once on the bare concrete is no longer present. Concrete is porous and requires a sealant to make the area easily cleanable. The floor must be

sealed or flooring must be installed within the next 90 days.

Violation: REQUIREMENT NOT MET FOR CALIFORNIA FOOD HANDLER CARD LAW

Description/Corrective Action: Proof of employees food handler cards could not be verified during today's inspection.

Please make sure to keep employee handler cards onsite and made available for

review upon request.

Violation: FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION

[HSC 113980, 114025-114027]

Description/Corrective Action: Employees personal items were observed being stored in the facility's walk-in freezer

next to food items intended for the business. Please make sure to designate an area for employees to store their personnel items that is not next to food items intended for

customer consumption.

Violation: IMPROPER HOT HOLDING TEMPERATURE(S)

[HSC 113996]

Description/Corrective Action: Meatballs in the facility's hot holding unit measured between 88-100F. Please make

sure meatballs are reheated to the manufacturer's specifications and hot held at 135F

or above.

General Comments:

Hand wash stations were stocked with soap, paper towels, and hot water.

Cold holding units measured at or below 41F.

The facility's hood was recently serviced in January 2022.

Please make sure to correct the violations noted above in a timely manner.

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

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DELI DELICIOUS #31	(559) 393-8889	PR0011113	February 10, 2022
FACILITY SITE ADDRESS:	CITY:	ZIP CODE:	INSPECTION TYPE:
855 N LEMOORE AVE STE 100	LEMOORE	93245	ROUTINE INSPECTION
OWNER NAME:	CERTIFIED FOOD MANAGER:	EXP DATE:	INSPECTOR:
HESAM HOBAB	Alyssa Soares	9/9/2026	Veronica Ochoa -REHS
The items (if any) listed below identify the violation(s) that must be One reinspection will be conducted (if needed) at no charge. A ser			
		Reinspection Re	equired: Yes: No: X
RESULTS OF EVALUATION: PASS X NEE	DS IMPROVEMENT FAIL	Reinspection Da	ate (on or after): N/A
		P	otential Food Safety All Star:
	-		
ORYGA Dagrer	t	Veronica Ochoo	a DEHS
<u>_</u>			
Received By:		Agency Represe	entative

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

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OFFICIAL INSPECTION REPORT

			
FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:
DELI DELICIOUS #31	(559) 730-8400	PR0009646	March 25, 2020
FACILITY SITE ADDRESS:	CITY:	ZIP CODE:	INSPECTION TYPE:
885 N LEMOORE AVE STE 100	LEMOORE	93245	PUBLIC INFORMATION/EDUCATION
OOU IN ELIMOGINE TWE GTE 100	ELWOOKE	30240	T OBEIG IN ORDINATION EDGGATION
OWNER NAME:	Program Description:	EXP DATE:	INSPECTOR:
SCOT GOBLE	1107 - KINGS DPH COVID-19	4/22/2022	Susan Lee-Yang - REHS
The items (if any) listed below identify the Health Code vio One reinspection will be conducted (if needed) at no charge	· ,	•	•
Violation: None Noted			
Violation. None Noted			
General Comments:			
The following were discussed with the owner/operate	or during today's visit:		
-The facility has made their dining completely inacce	secible to customers		
-At this time all food sales are for DELIVERY or TAK			
-The staff is aware of social distancing by requesting		mum of six feet fro	om each other and
staff.			
-Staff is practicing safe food handling procedures, m			
-All work surfaces should be cleaned and sanitized v	vith 100ppm chlorine or 200ppm C	AC frequently to p	prevent
contamination.	-1:-1	.	-
 -Under no circumstances are employees who feel si gastrointestinal (i.e. vomiting or diarrhea) symptoms 		lever, cougning or	sneezing) or
gastrolitiestinal (i.e. vorniting of diarrilea) symptoms	are anowed to work in the facility.		
Please contact our Department if you have further q	uestions.		
Reinspection Required: Yes: No: K	Reinspection Date (on or after	er): Not Spe	ecified
Nonepastion required.	romopoulon Bute (en er ant		5064
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		Susar	n Lee-Yang - REHS
	두	nvironmental Health	
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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: DELI DELICIOUS #31		BUSINESS PHONE: (559) 730-8400		RECORD ID#: PR0009646	DATE: December 05, 2019	
FACILITY SITE ADDRESS: 885 N LEMOORE AVE STE 100		CITY: LEMOORE CERTIFIED FOOD MANAGER: ALYSSA SOARES		ZIP CODE : 93245	INSPECTION TYPE: ROUTINE INSPECTION	
OWNER NAME: SCOT GOBLE				EXP DATE: 4/22/2022	INSPECTOR: Veronica Ochoa -REHS	
The items (if any) listed below identify the violation one reinspection will be conducted (if needed) at			-			
Violation: IMPROPER MAINTENANC	E OF FACILIT	Y OR EQUIPMENT		[HSC	114161-114182 & 114257]	
Description/Corrective Action:	: The facility's hood was last serviced in April 2019. Please schedule for the hood to be serviced, as it should be conducted once every 6 months.					
		trash cans were observe emptied every night,				
	The overall cleanliness of the facility should be improved as well. Please make sure that the facility is cleaned nightly.					t
	The soda fountain nozzles need to be cleaned regularly, as a build-up of soda syrup was visible.					
Violation: IMPROPER FOOD HANDLING PRACTICES [HSC 113961 - 113973]			ISC 113961 - 113973]			
Description/Corrective Action:		was once again obser olation was documente	_	-	_	
General Comments:						
Hand wash facility's were stocked with Cold holding units measured at or bel Soup in the back of the house measu	ow 41F.	towels, and hot water.				
Please work on correcting the violatio	ns noted abov	e.				
				Reinspection Re	equired: Yes:	No: X
RESULTS OF EVALUATION: PAS	S X NEE	DS IMPROVEMENT	FAIL	Reinspection Da	ate (on or after):	N/A
				F	Potential Food Safety All	Star:
Ern a	'le					
		_		Veronica Ocho	a -REHS	_
Received By:				Agency Represe	entative	
NOTE:	This report r	nust be made availal	ole to the nu	iblic on request		
INOIL.	The report i	nace be made availal	old to the pt	abile off request		

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