



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/ehs

FOOD SAFETY EVALUATION REPORT

FACILITY NAME: KETTLEMAN CITY MARKET	BUSINESS PHONE: (559) 836-4916	RECORD ID#: PR0010724	DATE: June 07, 2021
FACILITY SITE ADDRESS: 216 BECKY PEASE ST	CITY: KETTLEMAN CITY	ZIP CODE: 93239	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: RASHAD MOHAMED	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: Paven Bathth

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:

Temperature Control: Cold holding temperatures were measured below 41F.
Food Safety: All food items were observed to appropriately shelved and stored 6 inches above the ground.
Restroom: Restroom sink was maintain stocked (i.e., soap and paper towels) and adequate water temperatures (i.e., hot and cold running water) were noted as well.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Paven Bathth

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: KETTLEMAN CITY MARKET INC.	BUSINESS PHONE: (909) 262-1015	RECORD ID#: PR0010162	DATE: July 18, 2019
FACILITY SITE ADDRESS: 216 Becky Pease ST	CITY: KETTLEMAN CITY	ZIP CODE: 93239	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: NOUMAN HANNOUN	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: Rumi Chhina

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: FACILITY DOES NOT HAVE A VALID PERMIT [HSC 114381 (a)]

Description/Corrective Action: Food vending permit is outstanding. Please submit the permit fees to our office by 11:00AM of 7/19/2019. If the owner failed to pay the permit fees by tomorrow, the facility will be closed.

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

Description/Corrective Action: Restroom was not stocked with paper towels. Please always keep restrooms stocked with soap, paper towels and hot water available.

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

Description/Corrective Action: During inspection, observed expired baby food products for sale on shelf. Please remove them and check the expiration every time when you stock food products for sale.

General Comments:

Conducted a routine inspection of this facility and noted the following:

- Ambient temperatures of all cold holding units were noted at or below 41F.
- All food products are stored six inches above the ground.
- Ice machine was in good condition.

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): N/A <input type="checkbox"/> Potential Food Safety All Star:
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Rumi Chhina

Received By:

Agency Representative

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