



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: PAD THAI	BUSINESS PHONE: (559) 925-7959	RECORD ID#: PR0009564	DATE: June 23, 2022
FACILITY SITE ADDRESS: 75 W HANFORD ARMONA RD STE A	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: 1ST FOLLOW UP INSPECTION
OWNER NAME: SARIKA HENWOOD	CERTIFIED FOOD MANAGER: Sarika Henwood	EXP DATE: 9/10/2024	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: None Noted

General Comments:

Today's re-inspection took place to ensure the items noted on the facility's July 21, 2022 inspection report were completed. All of the seven items on the previous inspection were observed completed. The facility's walk-in refrigerator was repaired and measured at 35F. Please ensure to obtain adequate shelving to maintain all food items at least six inches off the ground in the walk-in refrigerator. The facility's floor and walls were cleaned, hood baffles were installed, ice machine and soda machine were observed properly installed, mop sink device to hang mops was installed, holes in the FRP were sealed and the gaps in the flooring at the booths were repaired. Thank you for correcting all of the requested items in a timely manner. This facility may begin to operate once the City of Lemoore allows for the business to open.

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:

Veronica Ochoa -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: PAD THAI	BUSINESS PHONE: (559) 817-5142	RECORD ID#: PR0009564	DATE: June 21, 2022
FACILITY SITE ADDRESS: 405 W D ST	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: CONSTRUCTION/EQUIPMENT INSF
OWNER NAME: SARIKA HENWOOD	CERTIFIED FOOD MANAGER: Sarika Henwood	EXP DATE: 9/10/2024	INSPECTOR: Veronica Ochoa -REHS

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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:

Today's construction/equipment inspection took place to determine if the plans submitted for the facility's new location were completed as approved by this department. The facility's new location is 75 W. Hanford Armona Suite A Lemoore, CA 93245.

Based on today's inspection, the following will have to be completed before final approval is granted:

1. The facility's walk-in refrigerator must be able to hold food items at 41F or below. Currently, the facility's walk-in refrigerator is not in operation as the unit was being worked on at the time of the inspection.
2. The entire kitchen area including the floors and walls must be cleaned as these areas still had debris from the previous tenants.
3. The mop sink needs to have a mechanism to hang mops to dry.
4. The hood baffles must be installed. The baffles were not in place at the time of this inspection due to the preparation for the balloon test for the ansef system.
5. Fill in the gaps on the floor at all booths so that the floor is easily cleanable.
6. Repair areas of the walls (FRP) in the kitchen that may have holes and/or that may be becoming undone.
7. Install the facility's ice machine and soda machine so that this department may be able to see the equipment properly set-up.

When the above items have been resolved, please call our department so that a re-inspection may occur. During this inspection, two non-commercial freezers were observed in the kitchen area as they were previously in use at the facility's previous location. This department will hereby allow the facility to continue to utilize these two non-commercial freezers; however, should these freezers fail in the future, they will have to be replaced with commercial type freezers.

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RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: PAD THAI	BUSINESS PHONE: (559) 817-5142	RECORD ID#: PR0009564	DATE: February 27, 2020
FACILITY SITE ADDRESS: 405 W D ST	CITY: LEMOORE	ZIP CODE: 93245	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: SARIKA HENWOOD	CERTIFIED FOOD MANAGER: Sarika Henwood	EXP DATE: 9/10/2024	INSPECTOR: Susan Lee-Yang - REHS

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Violation: IMPROPER THAWING OF FROZEN FOODS [HSC 114020]

Description/Corrective Action: Observed frozen meat being thawed at ambient temperature. Proper thawing includes: in the microwave, refrigerator, under continuous cool running water, or as part of the cooking process.

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

Description/Corrective Action: Observed raw shrimp and meat stored above vegetables inside reach-in refrigerators. Raw food products must be stored below and away from ready-to-eat foods.

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

Description/Corrective Action: Observed soot accumulation on the hood baffles. Hood was professionally cleaned in February 2020. Facility needs to maintain more frequent and routine cleaning of the hood baffles to prevent soot accumulation.

Observed continuous water leaking from the hot water handle of the 3-compartment sink located in the prep area. Repair/replace handle to prevent water from leaking.

Violation: IMPROPER HANDWASHING PROCEDURES BY FOODHANDLERS [HSC 113953-113953.4]

Description/Corrective Action: Ensure food handlers are properly washing their hands before cooking and when changing tasks.

General Comments:

- Hand wash sinks have hot water, soap, and paper towels.
- Cold holding units were noted satisfactory.
- Observed good organization inside small reach-in refrigerators.

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RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Susan Lee-Yang - REHS

Received By: _____

Agency Representative

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