



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 - GR2 (12-100)

Facility Name	Facility Address	City/State	Zip Code	
DONUT KING	1000 N 10TH AVE	HANFORD, CA	93230	
Owner/Operator	Facility Phone No.	Inspection ID	Inspection Result	
NARIN CHHANN	5595849020	31677	Pass	
Inspector Name	Inspection Date	Purpose of Inspection	Permit License	Expiration Date
Chaitanya Patel	3/8/2024	Routine Inspection	PR0005507	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

Overall Inspection Comment:

A routine inspection was conducted and following was observed.

Hot water temperature at the handwash sink, restroom sink and dishwasher sink were noted to be above 120°F. The 2 Compartment dishwash is also used as handwash sink. This area also holds soap and paper towels for handwash. Refrigeration units noted below 40°F.

Ventilation hood above the donut frying area was noted to be clean with moderate amount of grease buildup. Recommend cleaning the system to avoid grease buildup and grease fires. Keep the surrounding areas down and free of grease buildup.

Food manager, certificate active and present on site.

General cleanliness is in satisfactory condition .

Flavored coffee dispenser nozzles need to be maintained free of buildup. Ensure cleaning of nozzles as needed.

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

Signatures

Received By:

Inspected By:

Inspector Name: **Chaitanya Patel**

Title: **Environmental Health Officer I**

Date: **3/8/2024**

Phone: **559-584-1411**

Email: **Chaitanya.Patel@co.kings.ca.us**



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: DONUT KING	BUSINESS PHONE: (559) 584-9020	RECORD ID#: PR0005507	DATE: January 25, 2022
FACILITY SITE ADDRESS: 1000 N 10TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: NARIN R CHHANN / STEVEN CHHANN	CERTIFIED FOOD MANAGER: STEVE CHHANN	EXP DATE: 5/18/2020	INSPECTOR: SEM HAR GEBREGZIABIHE

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: Current food permit expired on January 1, 2021. This must be regularly updated before the date of expiration. Please contact our department to update this. Since the owner of the facility was not present during the inspection. An email will be sent to the owner in regards to this.

Violation: IMPROPER EXCLUSION OF VERMIN OR ANIMALS [HSC 114259-114259.3]

Description/Corrective Action: Although the owner of this facility was not present during the inspection. A copy of the pest control report should be available for review. Please email the inspector a copy of an up to date pest control report.

General Comments:

Observations:

Hand washing station was supplied with soap, paper towels, and hot water.

Bathroom was clean and supplied with hot water, soap, and paper towels.

Food prep area was clean, well maintained, and showed no signs of cross contamination when prep was being done.

Refrigeration units holding, milk, juice, coffee, apple juice, etc. were well maintained and at 41F and below.

Freezer units holding frozen dough, croissants and other miscellaneous items were 0F and below.

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

Received By:

SEM HAR GEBREGZIABIHE

Agency Representative

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