



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: KOINONIA CHRISTIAN FELLOWSHIP	BUSINESS PHONE: (559) 582-1528	RECORD ID#: PR0006214	DATE: September 07, 2022
FACILITY SITE ADDRESS: 12536 Hanford-Armona RD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: KOINONIA CHRISTIAN FELLOWSHIP	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	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:

The facility's commissary was observed equipped with hot water, soap, and paper towels at the hand wash sink.

All cold holding units measured at or below 41F.

The facility's three compartment sink was equipped with hot water, dish soap, and bleach.

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: KOINONIA CHRISTIAN FELLOWSHIP	BUSINESS PHONE: (559) 582-1528	RECORD ID#: PR0006214	DATE: January 13, 2022
FACILITY SITE ADDRESS: 12536 Hanford-Armona RD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: KOINONIA CHRISTIAN FELLOWSHIP	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	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: None Noted

General Comments:

Observations:

The kitchen is used by One- 11 Cafe . The operator informed the inspector that One-11 Cafe does not use this food facility often, and only uses it to make syrups for their signature drinks. This facility is mostly used for dry and cold storage . The employees do however use the dinning area to eat.

Refrigerated items such as deli meats, spinach, and, milk, sodas, etc. were below 41F.

Dry storage was 6 feet above the ground and well maintained.

Hand washing stations were well maintained and equipped with soap, hot water, and paper towels.

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:

Joe C. ...
 Received By: _____

SEM HAR GEBREGZIABIHE
 Agency Representative _____

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OFFICIAL INSPECTION REPORT

FACILITY NAME: KOINONIA CHRISTIAN FELLOWSHIP	BUSINESS PHONE: (559) 582-1528	RECORD ID#: PR0006214	DATE: February 16, 2021
FACILITY SITE ADDRESS: 12536 Hanford-Armona RD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: MEETING/CONSULTATION/PHONE
OWNER NAME: KOINONIA CHRISTIAN FELLOWSHIP	Program Description: 1623 - 1623 FOOD VENDING PERMIT -	EXP DATE:	INSPECTOR: Yatee Patel - REHS

The items (if any) listed below identify the Health Code 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:

This department spoke to Debra Braz and she stated that the kitchen is not in use due to COVID-19 restrictions.

Please call our department when the kitchen opens up for general public use and food prep for a routine inspection.

Thank you

Reinspection Required: Yes: No: **Reinspection Date (on or after):** Not Specified

Yatee Patel - REHS

Environmental Health Specialist

Received By: _____