

County of Kings - Department of Public Health

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: GRANGEVILLE LIQUOR	BUSINESS PHONE: (559) 217-1771Ext. CELL	RECORD ID#: PR0009102	DATE: October 21, 2020				
FACILITY SITE ADDRESS: 1705 N 11TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION				
OWNER NAME: PAUL SINGH SANDHE	CERTIFIED FOOD MANAGER: N/A	EXP DATE:	INSPECTOR: Yatee Patel - 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:							
Only pre-packaged food items sold.							
No cold holding PHF's sold.							
This department recommends the use face coverings for the employee and the customers.							
Thank you							
		Reinspection Re	equired: Yes:	No: X			
RESULTS OF EVALUATION: X PASS NEE	DS IMPROVEMENT FAIL	Reinspection Da	ite (on or after):	N/A			
		ПР	otential Food Safety All	Star:			

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

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME:		BUSINESS PHONE:	R	RECORD ID#:	DATE:	
GRANGEVILLE LIQUOR		(818) 800-7089	P	R0009240	April 04, 2019	
FACILITY SITE ADDRESS:		CITY:	Z	IP CODE:	INSPECTION TYPE:	
1705 N 11TH AVE		HANFORD	9	93230	ROUTINE INSPECTIO	N
OWNER NAME:		CERTIFIED FOOD MAN	AGER: E	XP DATE:	INSPECTOR:	
ABDULLAH YOUNAN		Not Specified			Rumi Chhina	
The items (if any) listed below identify One reinspection will be conducted (it				neation required		
one reinspection will be conducted (i	needed) at no charge.	A service fee is assessed for ea	ach additional reins	pection required.		
Violation: None Noted						
General Comments:						
Conducted routine inspection	on:					
- All cold holding units are a	it or below 41 F.					
- Food stored six inches abo	ove ground.					
- Facility was clean and wel	l organized.					
				Reinspection Re	equired: Yes:	No: X
RESULTS OF EVALUATION: X PASS NEED		NEEDS IMPROVEMENT	FAIL	Reinspection Da	ite (on or after):	N/A
				P	otential Food Safety A	.ll Star:
Seller 101	ilom					
Jeffery Wilson			Rumi Chhina		na	
Received By:			Agency Representative			

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:				
GRANGEVILLE LIQUOR	(818) 800-7089	PR0009240	April 10, 2018				
FACILITY SITE ADDRESS:	CITY:	ZIP CODE:	INSPECTION TYPE:				
1705 N 11TH AVE	HANFORD	93230	ROUTINE INSPECTION				
OWNER NAME:	CERTIFIED FOOD MANAGER:	EXP DATE:	INSPECTOR:				
ABDULLAH YOUNAN	Not Specified		Yatee Patel - 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:							
Only pre-packaged foods sold.							
All foods observed above floor.							
Please be sure to clean the soda nozzles frequently with soap and bleach solution.							
Thank you							
		Reinspection Re	equired: Yes: No: X				
RESULTS OF EVALUATION: X PASS NEED	OS IMPROVEMENT FAIL	Reinspection Da	ate (on or after): N/A				
		□ P	otential Food Safety All Star:				
		•					
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- J		Yatee Patel - REHS					
Received By:		Agency Representative					

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