

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: FREEZE STYLE FROZEN YOGURT	BUSINESS PHONE: (559) 589-9570	RECORD ID#: PR0009179	DATE: April 06, 2018
FACILITY SITE ADDRESS: 566 N 11TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ANGEL DE LOS SANTOS	CERTIFIED FOOD MANAGER: ANGEL DE LOS SANTOS	EXP DATE : 5/20/2018	INSPECTOR: Liliana Stransky - REHS
The items (if any) listed below identify the violation(s) that must be One reinspection will be conducted (if needed) at no charge. A ser			
Violation: None Noted			
General Comments: A routine inspection was attempted and the building will be closed.	was found empty with a "for lease"	sign at the door.	The facility file
RESULTS OF EVALUATION: PASS NEE	DS IMPROVEMENT SAIL	Reinspection Re Reinspection Da	



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:
FREEZE STYLE FROZEN YOGURT	(559) 589-9570	PR0009179	October 17, 2017
FACILITY SITE ADDRESS:	CITY:	ZIP CODE:	INSPECTION TYPE:
566 N 11TH AVE	HANFORD	93230	ROUTINE INSPECTION
OWNER NAME:	CERTIFIED FOOD MANAGER:	EXP DATE:	INSPECTOR:
ANGEL DE LOS SANTOS	ANGEL DE LOS SANTOS	5/20/2018	Lupe Tapia
The items (if any) listed below identify the violation(s) that must be on One reinspection will be conducted (if needed) at no charge. A serv			
Violation: IMPROPER MAINTENANCE OF FACILITY	Y OR EQUIPMENT	-	114161-114182 & 114257]
Description/Corrective Action: Clean and sar	nitize mop sink and floor sink to rer		debris.
General Comments: Conducting a routine inspection at this facility: -Hand wash sinks accessible and fully stocked -Hot and cold water available throughout the facility's -Approved both cold <41F and hot >135F foods -Pest Control: -Food distributor:	s sinks		
RESULTS OF EVALUATION: X PASS NEED	DS IMPROVEMENT FAIL	Reinspection Re Reinspection Da	
Received By:		Lupe Tap Agency Represe	



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:
FREEZE STYLE FROZEN YOGURT	(559) 589-9570	PR0009179	April 11, 2017
FACILITY SITE ADDRESS:	CITY:	ZIP CODE:	INSPECTION TYPE:
566 N 11TH AVE	HANFORD	93230	1ST FOLLOW UP INSPECTION
OWNER NAME:	CERTIFIED FOOD MANAGER:	EXP DATE:	INSPECTOR:
ANGEL DE LOS SANTOS	ANGEL DE LOS SANTOS	5/20/2018	Abel Simon - 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:

A follow-up re-inspection was performed today of this facility to verify compliance with required corrective actions for violations noted on the last routine inspection which resulted in a closure of the facility. The following was noted during today's inspection:

Hot water was available through out the facility. Store owner stated that the reason there was no hot water available in the routine inspection was because a breaker was out and had not been switched on. The temperature of the water in the three compartment sink was able to reach 120°F. There was hot water available in the bathroom and hand wash sink.

The reach-in cold holding unit was noted to be holding temperature below 41°F.

The hand wash station was fully stocked.

All items in the dry storage area were observed to be above the floor six inches.

Thank you for correcting the above noted issue in a timely manner. This facility is now approved to re-open.

				Reinspection Required:	Yes:	No: X
RESULTS OF EVALUATION:	X PASS	NEEDS IMPROVEMENT	FAIL	Reinspection Date (on or after):		N/A
				Potential Fo	od Safety All	Star:

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

M

Abel Simon - REHS

Received By:

Agency Representative