

FOOD SAFETY EVALUATION REPORT

FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:
IRWIN STREET INN	(559) 584-4586	PR0009484	June 29, 2022
FACILITY SITE ADDRESS:	CITY:	ZIP CODE:	INSPECTION TYPE:
522 N IRWIN ST	HANFORD	93230	ROUTINE INSPECTION
OWNER NAME:	CERTIFIED FOOD MANAGER:	EXP DATE:	INSPECTOR:
JACK PATEL	AVNI PATEL	3/15/2021	SEMHAR 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: IMPROPER CLEANING OF UTENSILS AND EQUIPMENT

[HSC 114095-114099.5 & 114101-114119]

Description/Corrective Action:	Observed food debris and grease accumulation inside and outside of the stove and grill (On handle bars, debris tray, etc.). Please clean and disinfect the stove and grill as soon as possible.		
	Observed food debris, various liquid accumulation etc. in all freezer/ refrigeration units. Please clean all units (inside and out) to prevent microbial growth and cross contamination.		
	Observed water on the floor next to the stove and next to the manual dishwasher. Please clean and make sure no water is on the ground to prevent a tripping hazard.		
	Observed a bucket of water with knives and tongs in the 2 compartment sink. Please ensure all utensils are cleaned properly before each use.		
	Observed dirty utensils placed in the drawers with the clean utensils. Please clean all utensils in the drawer across from the manual diswahser.		
Violation: NO CURRENT CERTIFIED	FOOD SAFETY PERSON ON STAFF	[HSC 113947-113947.6]	
Description/Corrective Action:	This facility does not have a valid food manager ca facility expired on 03/15/2021. Please send a copy within sixty days from today.		
Violation: VERMIN INFESTATION		[HSC 114259.1]	
Description/Corrective Action:	Observed several cockroaches in the kitchen area Please increase the pest control services until the Thank you.		

General Comments:



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All refrigeration units were functioning properly at 41	F and below.		
All freezer units were functioning properly at 0F and below.			
Hand washing station was fully stocked with hot wate	er, soap, and paper towels.		
The manual dishwasher was functioning properly at 50 ppm (chlorine).			
All dry storage was in satisfactory condition.			
Please correct the noted violation as soon as possib	le.		
Thank you for your time.			
	_	Reinspection Re	equired: Yes: No: X
RESULTS OF EVALUATION: PASS X NEED	S IMPROVEMENT FAIL	Reinspection Da	ate (on or after): N/A
	Potential Food Safety All Star:		
Ster		SEMHAR GEBREN	CZIADIHE

Received By:

Agency Representative

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



FOOD SAFETY EVALUATION REPORT

FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:
IRWIN STREET INN	(559) 584-4586	PR0009484	April 29, 2021
FACILITY SITE ADDRESS:	CITY:	ZIP CODE:	INSPECTION TYPE:
522 N IRWIN ST	HANFORD	93230	1ST FOLLOW UP INSPECTION
OWNER NAME:	CERTIFIED FOOD MANAGER:	EXP DATE:	INSPECTOR:
JACK PATEL	AVNI PATEL	3/15/2021	Susan Lee-Yang - 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:	IMPROPER MAINTENANC	E OF HANDWASH FACILITIES	[HSC 113953 - 113593.2]	
Descrip	tion/Corrective Action:	Observed soap dispenser empty. Ensure the soap dispenser is stocked and functio	nal at all times.	
Violation:	VERMIN INFESTATION		[HSC 114259.1]	
Descrip	tion/Corrective Action:	Observed several cockroaches in the kitchen. Currently, pest control provides monthly services. cockroach problem is mitigated. Continue to retain	•	
Violation:	IMPROPER CLEANING OF	UTENSILS AND EQUIPMENT	[HSC 114095-114099.5 & 114101-114119]	
Description/Corrective Action:		Observed food debris accumulated on the pull out debris tray for the stove. Observed old grease accumulated between cooking equipment. Ensure equipment are thoroughly cleaned and cleaned on a regular basis. Pull out equipment and ensure thorough cleaning occurs behind and around equipment. Observed a bucket soaking knives and tongs inside the 2-compartment sink.		
		Ensure utensils are properly cleaned after each u	•	

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 April 13, 2021 routine inspection. The following were noted during today's inspection:

-The broken floor tiles by the dishwasher has been replaced with new tiles.

-The paper towel dispenser was stocked.

-There is some improvement in general cleaning of the kitchen. Observed stove, hood, and inside reach-in freezer clean. Continue to focus on cleaning throughout the facility.

-New cutting boards have replaced old worn out cutting boards.

-At the time of inspection, did not observe build-up of dishes that required cleaning.

-Observed the cold prep unit organized and free of cross contamination.

-Swift Pest Control was on-site on 4/22/21 and provided service to 10 rooms, inside the restaurant, and the exterior of the facility.

A billable re-inspection will be performed at no charge to verify compliance with today's noted violations. Should additional re-inspections be required, the facility will be assessed \$226 per inspection.



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OWNER NAME: JACK PATEL	CERTIFIED FOOD MANAGER: AVNI PATEL	EXP DATE: 3/15/2021	INSPECTOR: Susan Lee-Yang - 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.				
Reinspection Required: Yes: X No:				
RESULTS OF EVALUATION: PASS X NEEDS IMPROVEMENT FAIL		Reinspection Date (on or after): 5/13/2021		
		P	otential Food Safety All Star:	
att				
0 00		Susan Lee-Yang - REHS		

Agency Representative

Received By: