



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: KRISTI CLOWER CAFE	BUSINESS PHONE: (559) 707-4756	RECORD ID#: PR0000137	DATE: October 31, 2019
FACILITY SITE ADDRESS: 6672 HANFORD-ARMONA RD	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: KRISTI CLOWER	CERTIFIED FOOD MANAGER: KRISTI CLOWER	EXP DATE: 3/3/2020	INSPECTOR: Liliana Stransky - 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 CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]

Description/Corrective Action: The dishwashing machine was not dispensing sanitizer during the final rinse cycle. Bleach was available for use. Conduct final sanitizing step in a plastic tub by adding 100 ppm bleach and water solution. This must be done until the dishwasher is repaired.

Detail cleaning is required for all non-food contact surfaces. Excess grease was observed surrounding cooking equipment and dust build-up was noted over the dishwasher. This must be conducted on a routine basis to prevent build-up.

General Comments:

- Routine inspection -
- Observed refrigeration temperatures at or below 41F.
- Temperature of noodle soup was observed at 149F.
- Hand washing station had hand soap, paper towels and hot water available.,
- Restroom facilities were observed properly maintained.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

K C
Received By: _____

Liliana Stransky - 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: KRISTI CLOWER CAFE	BUSINESS PHONE: (559) 707-4756	RECORD ID#: PR0000137	DATE: September 25, 2018
FACILITY SITE ADDRESS: 10565 9TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: KRISTI CLOWER	CERTIFIED FOOD MANAGER: KRISTI CLOWER	EXP DATE: 3/3/2020	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.

Violation: IMPROPER MAINTENANCE OF HANDWASH FACILITIES [HSC 113953 - 113593.2]

Description/Corrective Action: Observed paper towel dispensers empty. Ensure paper towel dispensers are stocked with paper towels at all times.

Violation: IMPROPER COLD HOLDING TEMPERATURE(S) [HSC 113996]

Description/Corrective Action: Ambient temperature of standing refrigerator was noted above 41F. Lower thermostat and/or call for service. Ensure ambient temperature is at least 41F and below at all times.

General Comments:

- Hand wash station has hot and cold water and soap.
- Chlorine sanitizer for dishwasher was noted at 100 ppm.
- Gravy on the stove was noted above 135F.
- Observed all food products stored off the ground.
- Observed facility clean.

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:

Susan Lee-Yang - REHS

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: KRISTI CLOWER CAFE	BUSINESS PHONE: (559) 707-4756	RECORD ID#: PR0000137	DATE: March 27, 2018
FACILITY SITE ADDRESS: 10565 9TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: KRISTI CLOWER	CERTIFIED FOOD MANAGER: KRISTI CLOWER	EXP DATE: 3/3/2020	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.

Violation: OTHER PERMIT VIOLATION

Description/Corrective Action: Observed metal cans used as utensil storage. Discontinue use of cans and use plastic/stainless steel containers to store utensils.

Violation: IMPROPER CLEANING OF UTENSILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]

Description/Corrective Action: Chlorine sanitizer for dishwasher was noted at 25 ppm. At time of inspection, operator contacted for service. Ensure chlorine sanitizer concentration is at least 50 ppm.

General Comments:

Hand wash station has hot water, soap, and paper towels.

All cold holding units were noted at or below 41F.

RESULTS OF EVALUATION: [X] PASS [] NEEDS IMPROVEMENT [] FAIL

Reinspection Required: Yes: [] No: [X]

Reinspection Date (on or after): N/A

[] Potential Food Safety All Star:

K. C. (Handwritten signature)

Received By:

Susan Lee-Yang - REHS

Agency Representative

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