

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: FORTUNE HOUSE LLC		BUSINESS PHONE: (559) 585-8683	RECORD ID#: PR0008518	DATE: June 16, 2022		
FACILITY SITE ADDRESS: 729 W GRANGEVILLE BLVD		CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION		
OWNER NAME: QING CHEN		CERTIFIED FOOD MANAGER: Quing Chen	EXP DATE: 7/19/2026	INSPECTOR: Yatee Patel - REHS		
The items (if any) listed below identify the violatio One reinspection will be conducted (if needed) at						
Violation: IMPROPER PLUMBING OF	R LIQUID WAS	TE DISPOSAL		[HSC 114189-114242]		
condensation bucket. This f		was observed with a pipe connection that is dripping water (possible water from the walk-in and the freezer), but the water is dripping into a acility needs to call a certified plumber to verify why the condensation ripping into a floor drain (if any).				
Violation: IMPROPER CLEANING OF	UTENSILS AN	ISILS AND EQUIPMENT [HSC 114095-114099.5 & 114101-114119]				
Description/Corrective Action:	The inside of the hood, where there are missing panels was observed with grease accumulation. The missing panels were being washed, however, a professional cleaning is required to remove the grease from inside to avoid a fire hazard.					
General Comments:						
The temperatures of all the hot and co	old foods were	satisfactory.				
Hand washing station was fully stocked	ed. Please use	frequently.				
Clean and sanitize all equipment with	bleach solution	n, 3 compartment noted with c	hlorine solution.			
Thank you						
			Reinspection	Required: Yes: No: X		
RESULTS OF EVALUATION: PASS X NEEDS		OS IMPROVEMENT F	AIL Reinspection	Date (on or after): N/A		
				Potential Food Safety All Star:		
. 12			•			
Chan	`		Yatee Patel	- REHS		
Received By:			Agency Repre	sentative		
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NOTE: This report must be made available to the public on request						

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: FORTUNE HOUSE LLC	BUSINESS PHONE: (559) 585-8683		RECORD ID#: PR0008518	DATE: March 17, 2021	
FACILITY SITE ADDRESS: 729 W GRANGEVILLE BLVD	CITY: HANFORD		ZIP CODE : 93230	INSPECTION TYPE: ROUTINE INSPECTION	
OWNER NAME: QING CHEN	CERTIFIED FOOD MAI Quing Chen		EXP DATE: 7/19/2021	INSPECTOR: Yatee Patel - REHS	
The items (if any) listed below identify the violation(s) that One reinspection will be conducted (if needed) at no charg			spection required.		
Violation: IMPROPER THAWING OF FROZE	EN FOODS			[HSC 114020]	
Description/Corrective Action: Observed chicken being thawed in the three compartment sink with stagnant water. Educated the food operator on correct method of thawing. Operator turned on old running water.					
General Comments:					
The hand washing station by the food prep a hot water took a while it reached 100F during		e use this station	n before beginn	ing food prep, the	
All cold foods were below 41F. The reach-in	was also at 38F. All meats	were separated fi	rom the ready to	o eat foods.	
Hot foods were above 165F and final cooking	g was observed over 189F (chicken on the g	grill).		
No sit down is available for now, until our co	unty tier changes to a differe	ent tier. Currently	, the facility is o	ffering to-go food.	
Thermometer is available, please use freque	ently.				
Bleach is used for the 3 compartment sink. No it measures 100ppm of bleach solution. Strip		during today's v	isit. When in us	e, please be sure	
Thank you					
			Reinspection R	equired: Yes: No: X	
RESULTS OF EVALUATION: X PASS	NEEDS IMPROVEMENT	FAIL	Reinspection D	ate (on or after): N/A	
			Potential Food Safety All Star:		
agarel	Lo				
			Yatee Patel - REHS Agency Representative		
Received By:					

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OFFICIAL INSPECTION REPORT

FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:			
FORTUNE HOUSE LLC	(559) 585-8683	PR0008518	March 27, 2020			
FACILITY SITE ADDRESS:	CITY:	ZIP CODE:	INSPECTION TYPE:			
729 W GRANGEVILLE BLVD	HANFORD	93230	PUBLIC INFORMATION/EDUCATIOI			
OWNER NAME:	Program Description:	EXP DATE:	INSPECTOR:			
QING CHEN	1107 - KINGS DPH COVID-19	7/19/2021	Susan Lee-Yang - REHS			
The items (if any) listed below identify the Health Code vio One reinspection will be conducted (if needed) at no charge	* *	-	·			
Violation: None Noted						
Tionation. Hono Hotel						
General Comments:						
The following were discussed with the owner/operator during today's visit:						
-The facility has made their dining completely inacce	esible to customers					
-At this time all food sales are for DELIVERY or TAK						
-The staff is aware of social distancing by requesting	that customers keep apart a minin	num of six feet fro	m each other and			
staffStaff is practicing safe food handling procedures, m	onitoring hot & cold holding temper	atures, and washi	ng hands			
-All work surfaces should be cleaned and sanitized v contamination.						
-Under no circumstances are employees who feel sign	ck or are sick with respiratory (i.e. f	ever, coughing or	sneezing) or			
gastrointestinal (i.e. vomiting or diarrhea) symptoms	are allowed to work in the facility.					
Please contact our Department if you have further qu	uestions.					
Reinspection Required: Yes: No: X	Reinspection Date (on or afte	r): Not Spe	cified			
		Susan	Lee-Yang - REHS			
	En	vironmental Health				
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