

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:		BUSINESS PHONE:		RECORD ID#:	DATE:		
GILL'S TRUCK STOP		(559) 572-5710		PR0006482	March 17, 2022		
FACILITY SITE ADDRESS: 7954 E LACEY BLVD		CITY: HANFORD		ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION	N	
OWNER NAME:		CERTIFIED FOOD MAN	NAGER:	EXP DATE:	INSPECTOR:		
IQBAL S GILL, DALJIT SINGH		Not Specified			Luis Flores - REHS		
The items (if any) listed below identify the violati One reinspection will be conducted (if needed) a			-				
Violation: IMPROPER LABEL FOR F Description/Corrective Action:	The Mexican sales. However case. The discity of original	pasties obtained fro ver, the product man splay case must incl tion. perator stated he is c	m a separate v ufacturer's info ude signage tha	endor are held in rmation is not pro at identifies the p	a display case for ovided on the display roduct maker and the duct due to a vendor		
Violation: NO CURRENT CERTIFIED	D FOOD SAFET	Y PERSON ON STA	\FF	[1	HSC 113947-113947.6]		
Description/Corrective Action:	FIED FOOD SAFETY PERSON ON STAFF [HSC 113947-113947.6]						
General Comments:							
All monitored hot and cold food prod The facility kitchen, back storage are organized and maintained. Great jol	ea, walk-in box c	•	_	•	to be very well		
				Reinspection R	Required: Yes:	No: X	
RESULTS OF EVALUATION: PA	SS X NEE	OS IMPROVEMENT	FAIL	Reinspection D	Date (on or after):	Yes: No: X or after): N/A	
					Potential Food Safety Al	ll Star:	
22					DEMO		
		_		Luis Flores -	Luis Flores - REHS		
Received By:				Agency Repres	entative		

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

DAJE1PDQF 3:40 PM Page 1 of 1



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: GILL'S TRUCK STOP	BUSINESS PHONE: (559) 572-5710	RECORD ID#: PR0006482	DATE: March 26, 2021
FACILITY SITE ADDRESS: 7954 E LACEY BLVD	CITY: HANFORD	ZIP CODE : 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: IQBAL S GILL, DALJIT SINGH	CERTIFIED FOOD MANAGER: Harjit Kaur	EXP DATE: 5/19/2020	INSPECTOR: Luis Flores - 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: All cold food temperatures were monitored in the low holding unit were monitored well above 135 F. All temperatures area, food prep area, walk-in box cooperational condition.	emperatures met California State Fo	ood Code tempera	ature requirements.
RESULTS OF EVALUATION: X PASS NEED	DS IMPROVEMENT FAIL	Reinspection Reinspection D	equired: Yes: No: X ate (on or after): N/A
		F	Potential Food Safety All Star:
No signiture due to Covid 19		Luis Flores -	REHS
Received By:		Agency Represe	entative

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DAKWNCDJY 10:13 AM Page 1 of 1



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: GILL'S TRUCK STOP		(559) 572-5710		PR0006482	DATE: August 26, 2020		
FACILITY SITE ADDRESS: 7954 E LACEY BLVD		CITY: HANFORD		ZIP CODE: INSPECTION TYLE 93230 ROUTINE INSPE			
OWNER NAME: IQBAL S GILL, DALJIT SINGH		CERTIFIED FOOD MANAGER: Harjit Kaur		EXP DATE: 5/19/2020	INSPECTOR: Yatee Patel - REHS		
he items (if any) listed below identify the violation reinspection will be conducted (if needed) at	· •	=	•				
Violation: IMPROPER COLD HOLDIN Description/Corrective Action:	The cold hold	ling unit across the gopening and closing				ue to	
General Comments: Hand washing station was fully stock Bleach is used to sanitize all utensils Employees were not observed wearing Employees wore after inspector requested to the continuity of the continuit	ng mask during ested owner to vas 41F and lov	the visit, it is recomr encourage all emplo ver. Hot holding food	nended to follow yees wear to av s in the deli cas	oid an outbreak	ng steam unit w	vere	
RESULTS OF EVALUATION: PA	SS X NEEI	DS IMPROVEMENT	FAIL		Required: Your after Potential Food S):	N/A ar:

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DARKA5MJ6 11:10 AM Page 1 of 1