

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

DOM/DIO GATEDINO	BUSINESS PHONE:	RECORD ID#:	DATE:
DOWD'S CATERING	Not Specified	PR0005548	August 16, 2021
FACILITY SITE ADDRESS:	CITY:	ZIP CODE:	INSPECTION TYPE:
136 A MCCREARY AVE	HANFORD	93230	ROUTINE INSPECTION
OWNER NAME:	CERTIFIED FOOD MANAGER:	EXP DATE:	INSPECTOR:
LANCE DOWD	LANCE DOWD	1/8/2024	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:			
ROUTINE INSPECTION -			
* Observed refrigerated units at 41F. Foods and be contamination.	verages were observed covered/clo	osed to prevent o	cross
* The hand washing stations in the kitchen and restralso available.	rooms were stocked with hand soap	o, paper towels a	and hot water was
* Food manager certification is available for Lance D	Dowd through 2024.		
* The facility was observed clean and very well main	ntained.		
Thank you!			
		Reinspection	Required: Yes: No: X
RESULTS OF EVALUATION: X PASS NEE	DS IMPROVEMENT FAIL	L Reinspection I	Date (on or after): N/A
			Potential Food Safety All Star:
		<u> </u>	
		Liliana Strans	ky - REHS
Received By:		Liliana Strans. Agency Repre	<u> </u>
Received By:			
Received By:			<u> </u>
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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: DOWD'S CATERING	BUSINESS PHONE: (559) 381-0781	RECORD ID#: PR0005548	DATE: October 23, 2019			
FACILITY SITE ADDRESS: 136 B N MCCREARY ST	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION			
OWNER NAME: LANCE AND ANN MARIE DOWD	CERTIFIED FOOD MANAGER: LANCE DOWD	EXP DATE: 1/8/2024	INSPECTOR: Veronica Ochoa -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: Hhand wash station was stocked with soap, paper to The commercial reach-in cold holding unit measured. The entire facility was observed very nicely organized.	d at 38F.					
RESULTS OF EVALUATION: X PASS NEED	DS IMPROVEMENT FAIL	Reinspection Re				
202		Veronica Ochod	a -REHS			
Received By:		Agency Represe	entative			

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Received By:

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:
DOWD'S CATERING	(559) 381-0781	PR0005548	July 27, 2017
FACILITY SITE ADDRESS:	CITY:	ZIP CODE:	INSPECTION TYPE:
136 B N MCCREARY ST	HANFORD	93230	ROUTINE INSPECTION
OWNER NAME:	CERTIFIED FOOD MANAGER:	EXP DATE:	INSPECTOR:
LANCE AND ANN MARIE DOWD	L. DOWD	3/10/2012	Susan Lee-Yang - 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:			
Hand wash station has hot water, soap and paper to	wels.		
Cold holding unit was noted at 41F.			
Facility is clean and organized.			
		Reinspection Re	equired: Yes: No: X
RESULTS OF EVALUATION: X PASS NEED	DS IMPROVEMENT FAIL	Reinspection Da	ate (on or after): N/A
		□P	otential Food Safety All Star:
amon Dul			
Wisconia		Susan Lee-Yang	- REHS

Agency Representative

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