

### **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: FIROUZA, INC.		BUSINESS PHONE: (661) 917-3070		<b>RECORD ID#:</b> PR0010464	<b>DATE:</b> June 27, 2022
FACILITY SITE ADDRESS:		CITY:		ZIP CODE:	INSPECTION TYPE:
620 W 7TH ST		HANFORD		93230	ROUTINE INSPECTION
OWNER NAME:		CERTIFIED FOOD MANA	GER:	EXP DATE:	INSPECTOR:
FAWZI ABDULHAY		Not Specified			Luis Flores - REHS
The items (if any) listed below identify the violation of the reinspection will be conducted (if needed) at			•		
Violation: IMPROPER CLEANING OF UTENSILS AN		ND EQUIPMENT		[HSC 114095-114099.5 & 114101-114119]	
Description/Corrective Action:	<b>Description/Corrective Action:</b> The soda dispenser nozzles were nozzles daily.		observed to have syrup build-up on them. Wash		
Violation: IMPROPER CLEANING OF	F UTENSILS A	ND EQUIPMENT		[HSC 114095-114099.5 & 114101-114119]	
Description/Corrective Action:		ice counter surface are umulation and require a daily.			
General Comments:					
Both the general store area, back sto  Perform the cited cleaning requireme  RESULTS OF EVALUATION: PA	ent as directed.	d the walk-in box coole	er area were d	Reinspection	
					Potential Food Safety All Star:
Received By:		-		Luis Flores Agency Repre	
Received By:		-		Luis Flores Agency Repre	

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### **FOOD SAFETY EVALUATION REPORT**

			-			
FACILITY NAME: FIROUZA, INC.	<b>BUSINESS PHONE:</b> (661) 917-3070	RECORD ID#: PR0010464	<b>DATE:</b> August 10, 2020			
FACILITY SITE ADDRESS: 620 W 7TH ST	CITY: HANFORD	<b>ZIP CODE:</b> 93230	INSPECTION TYPE: ROUTINE INSPECTION			
OWNER NAME: FAWZI ABDULHAY	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: Luis Flores - REHS			
The items (if any) listed below identify the violation(s) that must be on the conducted (if needed) at no charge. A serv						
Violation: IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT  Description/Corrective Action: The walk-in box cooler light switch cover plate was missing. Replace the cover switch as soon as possible.						
General Comments:  The facility was observed to be in good operational of satisfactory condition.  All refrigerated units were measured at meet cold hose Before the fryer and and hot holding unit will be utilize purchased for use.	lding requirements.					
RESULTS OF EVALUATION: X PASS NEED	OS IMPROVEMENT FAIL	Reinspection Re				
No signifure obtained due to Guid-19		Luis Flores - I	REHS			
Received By:		Agency Represe	entative			

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

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# **OFFICIAL INSPECTION REPORT**

FACILITY NAME: FIROUZA, INC.	<b>BUSINESS PHONE:</b> (661) 917-3070	<b>RECORD ID#:</b> PR0010464	<b>DATE:</b> March 26, 2020
FACILITY SITE ADDRESS: 620 W 7TH ST	CITY: HANFORD	<b>ZIP CODE:</b> 93230	INSPECTION TYPE: PUBLIC INFORMATION/EDUCATION
OWNER NAME: FAWZI ABDULHAY	Program Description: 1107 - KINGS DPH COVID-19	EXP DATE:	INSPECTOR: Liliana Stransky - 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			
General Comments:			
The staff needs to practice SOCIAL DISTANCING be each other and staff. Only allow entry to customers Encourage only 5 or fewer customers at a time when Staff should be practicing frequent HAND WASHING time you change gloves.	that can safely keep the same dist n possible.	ance between th	em while they wait.
Staff must use sanitizing solution (chlorine 100ppm reduce the risk of contamination. All work surfaces, to prevent contamination.			
Under no circumstances are employees who feel sic gastrointestinal (i.e. vomiting or diarrhea) symptoms		ever, coughing o	r sneezing) or
An investigation was conducted today to review and followed. A copy of this summary will be emailed to questions.		* *	•
Reinspection Required: Yes: No: X	Reinspection Date (on or after	er): Not S	pecified
			ana Stransky - REHS
Received By:	Er	nvironmental Healt	h Specialist

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