

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: IHOP	BUSINESS PHONE: (559) 583-9863	RECORD ID#: PR0007094	DATE: February 10, 2021			
FACILITY SITE ADDRESS: 180 N 11TH AVE	CITY: HANFORD	ZIP CODE : 93230	INSPECTION TYPE: ROUTINE INSPECTION			
OWNER NAME: J. ANTHONY KOUBA	CERTIFIED FOOD MANAGER: KASEY ASNOLD	EXP DATE: 3/29/2023	INSPECTOR: Paven Batth			
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:						
Temperature Control: All cold holding temperatures were measured to be at or below 41°F. All hot holding temperatures were noted to be at or above 135°F. Sanitation: Sanitizing solution for the sanitation buckets were measured at 200 PPM of quaternary ammonium concentration and dish washer was measured at 100 ppm of chlorine concentration. Documentation: Food safety regulatory requirements such as proper certifications (i.e., California Food Handler Cards and Food Safety Manger Certification) are obtained by the facility. Pest control is serviced on a monthly basis. Other Comments: In response to the COVID-19 pandemic, please implement the State (CDPH) guidelines (i.e., maintain a physical distance of 6 feet between individuals, use EPA-approved disinfectants, etc.) with your business. In order to help mitigate the spread of COVID-19 (i.e., increase the risk of exposure), a signature was not obtained. The inspection report will be emailed to the facility's point of contact.						
RESULTS OF EVALUATION: X PASS NEED	DS IMPROVEMENT FAIL	Reinspection Re				
No Significa Control due to Courty of protocolo		Paven Bat	ith			
Received By:		Agency Representative				

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:			
IHOP	(559) 583-9863	PR0007094	August 31, 2020			
FACILITY SITE ADDRESS:	CITY:	ZIP CODE:	INSPECTION TYPE:			
180 N 11TH AVE	HANFORD	93230	ROUTINE INSPECTION			
OWNER NAME:	CERTIFIED FOOD MANAGER:	EXP DATE:	INSPECTOR:			
J. ANTHONY KOUBA	KASEY ASNOLD	3/29/2023	Yatee Patel - REHS			
One reinspection will be conducted (if needed) at no charge. A se	rvice iee is assessed for each additional re	inspection required.				
General Comments: All cold and hot holding temperature were satisfactory, including the reach in units and the grill.						
Santizer (Bleach) is used for the dishes, and extra sanitizer concentration is used for tables and high used area. The facility is offering outdoor dining.						
Temperatures are taken for all the employees and Covid-19 measures are taken.						
Walk-in observed clean, including the dry storage a	rea.					
No signature was taken due to Covid-19 precaution	S.					
Over all food facility is in good operating condition f	or food safety.					
Thank you						
RESULTS OF EVALUATION: X PASS NEED	DS IMPROVEMENT FAIL	Reinspection R	equired: Yes: No: X			
		Reinspection D	ate (on or after): N/A			
		☐ F	Potential Food Safety All Star:			

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

11:17 AM

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OFFICIAL INSPECTION REPORT

	-		
FACILITY NAME:	BUSINESS PHONE:	RECORD ID#:	DATE:
IHOP	(559) 583-9863	PR0007094	March 25, 2020
EACH ITV CITE ADDDESS.	CITY:	ZIP CODE:	INSPECTION TYPE:
FACILITY SITE ADDRESS: 180 N 11TH AVE	HANFORD	93230	INSPECTION TYPE: PUBLIC INFORMATION/EDUCATION
100 N TITTAVE	TANI OND	33200	TOBLIC IN GRANATION/EDGGATION
OWNER NAME:	Program Description:	EXP DATE:	INSPECTOR:
J. ANTHONY KOUBA	1107 - KINGS DPH COVID-19	3/29/2023	Yatee Patel - REHS
The items (if any) listed below identify the Health Code vio	lation(s) that must be corrected. Th	ank you for your co	operation
One reinspection will be conducted (if needed) at no charge			
,			
Violation: None Noted			
General Comments:			
The facility has made their dinning completely inacc	essible to customers and is encou	raging customers t	to call in their
orders to minimize their wait.	cosible to customers and is checu	raging customers i	o can-in their
ordere to minimize their wall.			
At this time all food sales are for DELIVERY or TAK	E-OUT/PICK-UP ONLY!!		
The staff is aware of social distancing by requesting	that customers keep apart a minir	mum of six feet fro	m each other and
staff. Only allow entry to customers that can safely	keep the same distance between t	them while they wa	ait or encourage
them to wait in their cars.			
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Staff is practicing safe food handling procedures to p	protect food from contamination, n	nonitor hot & cold r	olding
temperatures, and WASH HANDS.			
Staff uses sanitizing solution (chlorine 100ppm or Q	AC 200nnm) for wining down all co	ounters and work s	surfaces to reduce
the risk of contamination. All work surfaces should be			
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Under no circumstances are employees who feel sid	k or are sick with respiratory (i.e.	fever, coughing or	sneezing) or
gastrointestinal (i.e. vomiting or diarrhea) symptoms	are allowed to work in the facility.		
An investigation was conducted today to review and		* *	•
followed. The report will be emailed to the owner/op	erator. Please contact our Depart	ment for further qu	estions.
Reinspection Required: Yes: No: X	Reinspection Date (on or aft	er): Not Sp	ecified
		Ya	tee Patel - REHS
	F	nvironmental Health	Specialist
Received By:			,
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