



Retail Food Establishment Inspection Report

Establishment Information	
Facility Name BAKING MEMORIES BY PAM	Facility Type Very Small Non Potentially Hazardous
Facility ID # ASPR-9JGJW3	Facility Telephone # 715 356-1478
Facility Address 1571 WHY 51 N ARBOR VITAE, WI 54568	
Licensee Name PAM PEARSALL	Licensee Address 9363 COUNTRY CLUB RD MINOCQUA, WI 54548

Inspection Information		
Inspection Type Routine	Inspection Date April 5, 2017	Total Time Spent

Equipment Temperatures	
Description True reach-in refrigerator	Temperature (Fahrenheit)

Warewashing Info						
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature
American Dish Service	low temp		50	Pro-Power	Chlorine	

OPERATOR - The violations in operating procedure or physical arrangement indicated below must be corrected by the next routine inspection or by a date specified in this report.

Observed Violations
<p>Total # 1</p> <p>Risk/Intervention - 08 - Adequate handwashing facilities supplied and accessible This is a core item OBSERVATION: No handwashing signage provided in the restrooms. CORRECTIVE ACTION(S): Provide handwashing signage at all handwashing sinks used by food employees. CODE CITATION: 6-301.14 A sign or poster that notifies FOOD EMPLOYEES to wash their hands shall be provided at all HANDWASHING SINKS used by FOOD EMPLOYEES and shall be clearly visible to FOOD EMPLOYEES.</p>

Comments:

Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in ch.227 statute, if state licensed, or a local ordinance if licensed by an agent health department.

Person in Charge

Sanitarian

Amy Springer