



Foodservice Establishment Inspection Report

<b>Establishment Information</b>	
Facility Name <b>CULVER'S OF ARBOR VITAE</b>	Facility Type <b>Restaurant</b>
Facility ID # <b>MWAN-83EMVZ</b>	Facility Telephone # <b>715 358-3494</b>
Facility Address <b>123 HWY 51 N WOODRUFF , WI 54568</b>	
Licensee Name <b>NORTHERN BLUE, INC</b>	Licensee Address <b>123 N HWY 51 WOODRUFF , WI 54568</b>

<b>Inspection Information</b>		
Inspection Type <b>Routine</b>	Inspection Date <b>03/17/2016</b>	Total Time Spent

<b>Equipment Temperatures</b>	
Description	Temperature (Fahrenheit)
Walk-In Cooler	28
Prep Line Cooler	24
Chicken hot holding unit	156
Delfield Cooler	34

<b>Food Temperatures</b>	
Description	Temperature (Fahrenheit)
Chili HH	146
Gravy HH	150
Beef HH	160
Burger Cook Temp	160
Onions CH	40
Bacon CH	39
Tomatoes CH	38
Coleslaw CH	35
Dressings in front counter CH	35
Lettuce CH	28

<b>Warewashing Info</b>						
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature
ES 2000 Sanitizer Buckets	Low Temp Sanitizer				Sodium Hypochlorite Quat	

<b>Certified Manager</b>		
Name <b>MARSHAL J SHIELDS</b>	Certificate # <b>DOGD-9MK9QP</b>	Certificate Expiration <b>10/19/2019</b>

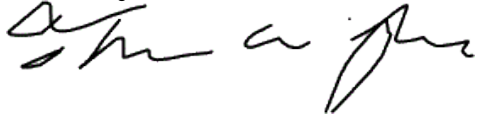
**OPERATOR** - The violations in operating procedure or physical arrangement indicated below must be corrected by the next routine inspection or by a date specified in this report.

<b>Observed Violations</b>
<b>Total # 0</b>

**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



**TAYLOR HAYNES**