



## Retail Food Establishment Inspection Report

<b>Establishment Information</b>	
Facility Name DIXIES COFFEE HOUSE	Facility Type Restaurant
Facility ID # ASPR-9WMKQK	Facility Telephone # 715 543-2353
Facility Address 6085 CTH W MANITOWISH WATERS, WI 54545	
Licensee Name THE COFFEE SHOP AT MANITOWISH WATERS	Licensee Address 12575 ULINE DR PLEASANT PRAIRIE, WI 53158

<b>Inspection Information</b>		
Inspection Type Routine	Inspection Date March 9, 2017	Total Time Spent

<b>Equipment Temperatures</b>	
Description	Temperature (Fahrenheit)
Summit front counter	36
Summit in kitchen area	36
True reach-in cooler	36

<b>Food Temperatures</b>	
Description	Temperature (Fahrenheit)
Shrimp Chowder - reheat	174

<b>Warewashing Info</b>						
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature
Hobart	Hi temp	160				

<b>Certified Manager</b>		
Name CAROLINE M BENSON	Certificate # KBRN-9WFN9K	Certificate Expiration 4/6/2020

**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 # 5</b>
<b>Risk/Intervention - 1A - Certified food manager: duties</b> This is a core item <b>OBSERVATION:</b> There is no approved food manager's certificate posted in the food establishment. <b>CORRECTIVE ACTION(S):</b> Provide & post an original State of Wisconsin, 360/Learn2Serve, Food Safety Professionals, Prometric, ServSave or recertification for small operators food manager's certificate. <b>CODE CITATION:</b> 12-201.11(C) A FOOD ESTABLISHMENT shall post a certificate issued by the DEPARTMENT under this section in a conspicuous place on the premises of the FOOD ESTABLISHMENT.
<b>Good Retail Practices - 39 - Wiping cloths: properly used and stored</b> This is a core item <b>OBSERVATION:</b> Wiping cloth used for wiping counters stored on counter. <b>CORRECTIVE ACTION(S):</b> Cloths used for wiping counters shall be stored in a sanitizing solution. <b>CODE CITATION:</b> 3-304.14 (B) Cloths in-use for wiping counters and other EQUIPMENT surfaces shall be: (1) Held between uses in a chemical sanitizer solution at a concentration specified under § 4-501.114; and

**Good Retail Practices - 46 - Warewashing facilities: installed, maintained, & used: test strips**

This is a priority foundation item

**OBSERVATION:** A chlorine test kit is not available for checking sanitizer concentrations.

**CORRECTIVE ACTION(S):** Provide a test kit or other device for measuring the concentration of sanitizing solutions.

**CODE CITATION:** 4-302.14 A test kit or other device that accurately measures the concentration in mg/L of SANITIZING solutions shall be provided. [Pf]

**Risk/Intervention - 08 - Adequate handwashing facilities supplied and accessible**

This is a priority foundation item

**OBSERVATION:** No single-use toweling available at handwashing sink by front counter for hand drying.

**CORRECTIVE ACTION(S):** Provide single-use toweling or other approved devices at handwashing sink to facilitate proper handwashing.

**CODE CITATION:** 6-301.12 Each HANDWASHING SINK or group of adjacent HANDWASHING SINKS shall be provided with:

(A) Individual, disposable towels; [Pf]

(B) A continuous towel system that supplies the user with a clean towel; Pf or

(C) A heated-air hand drying device; [Pf] or

(D) A hand drying device that employs an air-knife system that delivers high velocity, pressurized air at ambient temperatures. [Pf]

**Good Retail Practices - 55 - Compliance with DATCP 75 and Stat. 97**

This is a core item

**OBSERVATION:** Current permit is not posted in establishment

**CORRECTIVE ACTION(S):** Post permit in public view.

**CODE CITATION:** ATCP 75.104 (7) PERMIT POSTING. A current permit issued by the department shall be posted in a place visible to the public. A permit may not be altered or defaced.

**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**