

VILAS COUNTY PUBLIC
HEALTH DEPARTMENT
Environmental Health
330 Court Street
Eagle River, WI 54521



STATE OF WISCONSIN

Retail Food Establishment Inspection Report

Establishment Information	
Facility Name CLUB 45	Facility Type Restaurant
Facility ID # HSAT-7QWL5S	Facility Telephone # 715 547-3571
Facility Address 4800 OLD HWY 45 CONOVER, WI 54519	
Licensee Name NORTHSIDERS, LLC	Licensee Address 4800 OLD HWY 45 CONOVER, WI 54519

Inspection Information		
Inspection Type Routine	Inspection Date January 12, 2017	Total Time Spent

Equipment Temperatures	
Description	Temperature (Fahrenheit)
Walk-In Cooler	41

Food Temperatures	
Description	Temperature (Fahrenheit)
Italian Beef HH	140

Warewashing Info						
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature
ADS	Low Temp Sanitizer		50		Sodium Hypochlorite	

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
Total # 0

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