



Retail Food Establishment Inspection Report

Establishment Information	
Facility Name MAPLE VIEW RESORT	Facility Type Restaurant
Facility ID # HSAT-7QX2YE	Facility Telephone # 715 479-4600
Facility Address 3360 MC PEAK RD CONOVER, WI 54519	
Licensee Name WIS NORTHLAND VAC INC	Licensee Address 3360 MCPEAK RD CONOVER, WI 54519

Inspection Information		
Inspection Type Routine	Inspection Date September 16, 2016	Total Time Spent

Equipment Temperatures	
Description Turbo Air	Temperature (Fahrenheit) 41

Warewashing Info						
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature
CMA L-TX			100	ProPower	Chlorine	

Certified Manager		
Name ANTHONY M OSIECKI	Certificate # KBRN-9ATM4K	Certificate Expiration 07/15/2018

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

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Amy Springer