

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 POPES GRESHAM LODGE | Facility Type Restaurant |
| Facility ID # HSAT-7QXK7F | Facility Telephone # 715 385-2742 |
| Facility Address 4042 POPES RD ARBOR VITAE, WI 54568 | |
| Licensee Name PAULS RESORT ENTPS INC | Licensee Address 4042 POPES RD WOODRUFF, WI 54568 |

| Inspection Information | | |
|-------------------------------|---------------------------------------|------------------|
| Inspection Type Routine | Inspection Date September 08, 2016 | Total Time Spent |

| Equipment Temperatures | |
|-------------------------------|--------------------------|
| Description | Temperature (Fahrenheit) |
| Norlake Cooler | 28 |
| Walk-In Cooler | 38.5 |

| Warewashing Info | | | | | | |
|-------------------------|---------------------|--------------|-----|----------------|---------------------|-------------|
| Machine Name | Sanitization Method | Thermo Label | PPM | Sanitizer Name | Sanitizer Type | Temperature |
| American Dish Service | Low Temp Sanitizer | | 100 | | Sodium Hypochlorite | |

| Certified Manager | | |
|--------------------------|------------------------------|--------------------------------------|
| Name KATHY J PAULS | Certificate # DOGD-97AC6V | Certificate Expiration 07/29/2018 |

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



TAYLOR HAYNES