



Retail Food Establishment Inspection Report

Establishment Information	
Facility Name MCGANN'S CAFE AND WINE BAR	Facility Type Restaurant
Facility ID # MWAN-7WTRDD	Facility Telephone # 715 385-3200
Facility Address 5461 PARK ST BOULDER JUNCTION , WI 54512	
Licensee Name MCGANN'S CAFE,INC.	Licensee Address PO BOX 282 BOULDER JUNCTION , WI 54512

Inspection Information		
Inspection Type Routine	Inspection Date April 11, 2017	Total Time Spent

Equipment Temperatures	
Description Fagor- reach in cooler	Temperature (Fahrenheit) 37

Warewashing Info						
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature
.	3 compartment behind bar		100	BTF-Chlor-tab	Chlorine	

Certified Manager		
Name DENNIS M MCGANN	Certificate # DROS-8Y834N	Certificate Expiration 06/26/2017

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
<p>Total # 1 Good Retail Practices - 46 - Warewashing facilities: installed, maintained, & used: test strips This is a priority foundation item OBSERVATION: A test kit is not available for checking sanitizer concentrations. CORRECTIVE ACTION(S): Provide a test kit 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]</p>

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

A handwritten signature in black ink, consisting of a large 'D' followed by a horizontal line and several vertical strokes.

Sanitarian

A handwritten signature in black ink, appearing to be 'Amy Springer' with a long horizontal flourish at the end.

Amy Springer