

VILAS COUNTY PUBLIC  
HEALTH DEPARTMENT  
Environmental Health  
330 Court Street  
Eagle River, WI 54521  
F-45002A (Rev. 09/08)



STATE OF WISCONSIN  
s. 97.30, s. 254.61, Subchapter  
VII, Wis. Stats.

## Retail Food Establishment Inspection Report

| <b>Establishment Information</b>                      |  |
|---|--|
| Facility Name<br>STILLWATERS FOOD & SPIRITS           | Facility Type<br>Restaurant                              |
| Facility ID #<br>HSAT-7QWH39                          | Facility Telephone #<br>715 542-3652                     |
| Facility Address<br>7914 HWY K<br>STAR LAKE, WI 54561 |  |
| Licensee Name<br>STILLWATER STAR LAKE LLC             | Licensee Address<br>7914 HWY K<br>STAR LAKE, WI<br>54561 |

| <b>Inspection Information</b> |                                  |                  |
|-------------------------------|----------------------------------|------------------|
| Inspection Type<br>Routine    | Inspection Date<br>June 07, 2016 | Total Time Spent |

| <b>Equipment Temperatures</b> |                          |
|-------------------------------|--------------------------|
| Description                   | Temperature (Fahrenheit) |
| Walk-in cooler                | 34                       |
| Superior reach-in cooler      | 33                       |
| Homestyle refrigerator        | 25                       |

| <b>Food Temperatures</b> |                          |
|--------------------------|--------------------------|
| Description              | Temperature (Fahrenheit) |
| Peppers - CH             | 36                       |

| <b>Warewashing Info</b>        |                     |              |     |                |                |             |
|--------------------------------|---------------------|--------------|-----|----------------|----------------|-------------|
| Machine Name                   | Sanitization Method | Thermo Label | PPM | Sanitizer Name | Sanitizer Type | Temperature |
| name plate worn off Model L-1C | low temp            |              | 50  | Ultra Kleen    | Chlorine       |             |

| <b>Certified Manager</b> |                              |                                      |
|--------------------------|------------------------------|--------------------------------------|
| Name<br>KAREN ALTAMORE   | Certificate #<br>DOGD-8XQ9A6 | Certificate Expiration<br>11/20/2017 |

**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**

**Total # 2**

**Good Retail Practices - 45 - Food and non-food contact surfaces cleanable, properly designed, constructed and used**

This is a core item

**REPEAT OBSERVATION:** Homestyle refrigerator is not ANSI certified or approved by the department. Shelves on door are duct tapes

**CORRECTIVE ACTION(S):** Unapproved equipment shall be removed from food service. Homestyle refrigerator needs to be replaced by next routine inspection.

**CODE CITATION:** 4-205.11 (A) Except as specified under ¶¶ (B) of this section, FOOD EQUIPMENT that is certified or classified for sanitation by an American National Standards Institute (ANSI)-accredited certification program is deemed to comply with Parts 4-1 and 4-2 of this Chapter.

(B) FOOD EQUIPMENT that is not certified or classified for sanitation by an American National Standards Institute (ANSI)-accredited certification program shall be approved by both the department of health services and the department of agriculture, trade and consumer protection.

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

This is a core item

**REPEAT OBSERVATION:** Handwashing sink is not non-hand operated.

**CORRECTIVE ACTION(S):** Employee handwashing sinks shall be non hand operated and if metered shall provide a flow of water without the need for reactivation for at least 15 seconds.

**CODE CITATION:** 5-202.12 (C) A HANDWASHING SINK:

(1) At a newly constructed FOOD ESTABLISHMENT when a HANDWASHING SINK, or sink faucet is replaced or installed it shall have a faucet of the type which is not hand operated.

(2) That is equipped with a self-closing, slow-closing, or metering faucet shall provide a flow of water for at least 15 seconds without the need to reactivate the faucet.

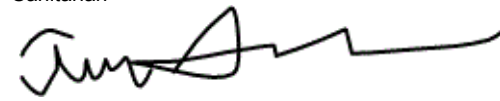
**Comments**

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