



Foodservice Establishment Inspection Report

<b>Establishment Information</b>	
Facility Name <b>BIG MAMA'S GYROS</b>	Facility Type <b>Mobile Restaurant</b>
Facility ID # <b>BSAW-882GZ9</b>	Facility Telephone # <b>608</b>
Facility Address <b>1100 KANE ST LA CROSSE, WI 54603</b>	
Licensee Name <b>WISCONSIN WATERS CO</b>	Licensee Address <b>W5744 SHERWOOD DR LA CROSSE, WI 54601</b>

<b>Inspection Information</b>		
Inspection Type <b>Routine</b>	Inspection Date <b>05/23/2016</b>	Total Time Spent

<b>Equipment Temperatures</b>	
Description	Temperature (Fahrenheit)
refrigerator	

<b>Warewashing Info</b>						
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature
3 compartment sink	chemical					

<b>Certified Manager</b>		
Name <b>JAMES M WHITAKER</b>	Certificate # <b>KBRN-8XCHK3</b>	Certificate Expiration <b>02/16/2017</b>

**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.

<b>Observed Violations</b>
<b>Total # 0</b>

<b>Comments</b>

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

**Doug Schaefer  
(608) 785-9679**