



Foodservice Establishment Inspection Report

Establishment Information	
Facility Name BLACK STALLION BBQ	Facility Type Mobile Service Base
Facility ID # ASTS-8XWK3D	Facility Telephone # 608
Facility Address 1100 KANE ST LA CROSSE , WI 54603	
Licensee Name SMITH, JONATHAN	Licensee Address 3515 KENTON ST APT 1 LA CROSSE , WI 54601

Inspection Information		
Inspection Type Pre-inspection	Inspection Date 06/03/2014	Total Time Spent

Equipment Temperatures	
Description refrigeration	Temperature (Fahrenheit) 40

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
Install hands free faucet on hand sink.

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