

LA CROSSE COUNTY
HEALTH DEPARTMENT
Environmental Health Division
F-45002A (Rev. 09/08)



STATE OF WISCONSIN
Bureau of Environmental and
Occupational Health
s. 97.30, s. 254.61, Subchapter
VII, Wis. Stats.

Foodservice Establishment Inspection Report

Establishment Information	
Facility Name CONCORDIA BALLROOM	Facility Type Tavern
Facility ID # ASTS-8T9JNJ	Facility Telephone # 608 782-7049
Facility Address 1129 LA CROSSE ST LA CROSSE, WI 54601	
Licensee Name CONCORDIA AID SOCIETY INC	Licensee Address 1129 LA CROSSE ST LA CROSSE, WI 54601

Inspection Information		
Inspection Type Routine	Inspection Date January 08, 2014	Total Time Spent

Equipment Temperatures	
Description	Temperature (Fahrenheit)
Cooler	
Freezer	

Warewashing Info					
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type
3 comp sink	Chemical				

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</p> <p>Risk/Intervention - 08 - Adequate handwashing facilities supplied and accessible OBSERVATION: (CORRECTED DURING INSPECTION): No handwashing signage provided at bar handwashing sink. CORRECTIVE ACTION(S): Provide handwashing signage at all handwashing sinks used by food employees. CODE CITATION: 6-301.14 A sign or poster that notifies FOOD EMPLOYEES to wash their hands shall be provided at all HANDWASHING SINKS used by FOOD EMPLOYEES and shall be clearly visible to FOOD EMPLOYEES.</p>

Comments
1. Menu review and risk assessment conducted at time of inspection.

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



Jeff George

Sanitarian



Katie Dempsey
(608) 785-9731