

**INSPECTION REPORT**

LA CROSSE COUNTY HEALTH DEPARTMENT

H & R  ID # \_\_\_\_\_  
 AG  ID # \_\_\_\_\_  
 TAVERN  COUNTY ID # Indoor food

DATE OF INSPECTION: 10/14/13

300 4TH STREET NORTH  
 LA CROSSE, WI 54601-3228

Phone: (608) 785-9771

FAX: (608) 793-6565

Seating Capacity: \_\_\_\_\_

www.co.la-crosse.wi.us/health/environmental/index.htm

Name of Establishment: General Nutrition Center 3090# Phone Number: (608) 781-1442  
 Street Address/City: 3800 State Highway 16 Suite 176 LaCrosse WI Hours of Operation: \_\_\_\_\_  
 Name of Licensee: General Nutrition Corp 54601 Manager: Kevin Reynolds  
 Licensee Address/City: 300 6th Ave Retail Oper Pittsburg PA 15222 Certification #: \_\_\_\_\_ Expires: \_\_\_\_\_

- Permit Displayed  Routine  Pre  1st  Re  \*2nd Re  Complaint  Well  Septic

\*Additional re-inspections will result in a \$60 fee per 11.51, La Crosse County Code and/or legal action or loss of license.

RISK FACTOR VIOLATIONS (Critical)	GOOD RETAIL PRACTICE VIOLATIONS
1. Demonstration of Knowledge, PIC duties	15. Personal Cleanliness
2. Employee Health	16. Food Honestly Presented, Labeled, Distressed Products, Shellfish ID
3. Consumer Advisory Disclosure, Warning	17. Plant Food Cooked for Hot Holding
4. Food From Approved Source	18. Protection for Contamination. Food Shields
5.1 Inadequate Cooking	19. Equipment to Control Product Temperature
5.2 Reheating	20. Proper Thawing
5.3 Cooling	21. Food Dispensing Utensils
5.4 Cold and Hot Holding	22-24. Food Equipment, Warewashing
5.5 Date Marking and Discarding	25. Wiping Cloths, Gloves
5.6 Time as Control	26-27. Clean Utensils, Single Service Utensils
6. Highly Susceptible Populations Served	28. Water, Safe Sources, Hot & Cold
7. Protection from Contamination	29-30. Plumbing: Installed, Maintained, Protection
8. Food Contact Surfaces Clean, Sanitized	31-32. Toilet Facilities
9. Proper Handwashing	33-34. Sewage, Garbage, Grease Disposal
10. Good Hygienic Practices	35-38. Physical Facility
11. Prevention of Contamination with Hands	39. Pest and Animal Control
12. Handwashing Facilities	40. Variance Required
13. Chemical, Food Additives	
14. Conformance with (HACCP)	

**DESCRIPTION OF VIOLATION and CORRECTIVE ACTION REQUIRED**

*No related items being sold at present; Refrigeration has been removed.*

*No Violation*

*Comment: Soap + Paper towels in the Bathroom would be better served in dispensers*

*Kevin Reynolds*  
 Signature of Licensee or Employee

*[Signature]*  
 Signature of Sanitarian/Time: