



Foodservice Establishment Inspection Report

Establishment Information	
Facility Name MINT, THE	Facility Type Restaurant
Facility ID # ASTS-9N5QCC	Facility Telephone # 608
Facility Address 1810 STATE ST LA CROSSE, WI 54601	
Licensee Name STATESIDE LLC	Licensee Address 622 JOHNSON ST LA CROSSE, WI 54601

Inspection Information		
Inspection Type Routine	Inspection Date October 29, 2015	Total Time Spent

Equipment Temperatures	
Description	Temperature (Fahrenheit)
Refrigeration	41, 39, 37, 40, 33, 41
Freezer	7, 2

Food Temperatures	
Description	Temperature (Fahrenheit)
Reheat - soup	165

Warewashing Info					
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type
Dishwasher	Chemical		50	Chlorine	
Wiping bucket	Chemical		50	Chlorine	

Certified Manager		
Name JENNIFER M BARNEY	Certificate # CJFY-9MAK7F	Certificate Expiration 05/07/2019

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

1. Menu review and risk assessment conducted.
2. No violations at time of inspection.

Announced 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

Anthony Swartwout

Sanitarian

A handwritten signature in black ink, appearing to read 'Nicole Frankfourth', written in a cursive style.

Nicole Frankfourth
(608) 785-9731