



Retail Food Establishment Inspection Report

Establishment Information	
Facility Name PRAIRIE INN & SUITES	Facility Type Restaurant
Facility ID # HSAT-7QXQNB	Facility Telephone # 608 781-4490
Facility Address 3913 CIRCLE DR HOLMEN , WI 54636 -9187	
Licensee Name PRAIRIE INN & SUITES INC	Licensee Address W5716 STUMILIN RD HOLMEN , WI 54636

Inspection Information		
Inspection Type Routine	Inspection Date 11/09/2016	Total Time Spent

Equipment Temperatures	
Description	Temperature (Fahrenheit)
reach-in cooler	38

Warewashing Info						
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature
3 compartment sink	chemical		nsu		QA	

Certified Manager		
Name PEGGY M JOHNSON	Certificate # DOGD-8SX9SR	Certificate Expiration 06/21/2017

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
Menu review and risk assessment conducted.

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


tammy mccoy

Sanitarian


Doug Schaefer
(608) 785-9679