



Foodservice Establishment Inspection Report

<b>Establishment Information</b>	
Facility Name <b>SPANKY'S SALOON</b>	Facility Type <b>Restaurant</b>
Facility ID # <b>ASTS-9EVKDP</b>	Facility Telephone # <b>608 782-1697</b>
Facility Address <b>411 S 3RD ST LA CROSSE , WI 54601</b>	
Licensee Name <b>JETTE CORPORATION</b>	Licensee Address <b>411 S 3RD ST LA CROSSE , WI 54601</b>

<b>Inspection Information</b>		
Inspection Type <b>Routine</b>	Inspection Date <b>03/21/2014</b>	Total Time Spent

<b>Equipment Temperatures</b>	
Description	Temperature (Fahrenheit)
reach-in freezer	3
walk-in cooler	38
reach-in cooler	36
under counter cooler	40

<b>Warewashing Info</b>					
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type
3 compartment sink	chemical		NSU	QD II Sanitizer	Quaternary Ammonium Compound

**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.

<b>Observed Violations</b>
<p><b>Total # 2</b></p> <p><b>Risk/Intervention - 08 - Adequate handwashing facilities supplied and accessible</b>  <b>OBSERVATION: (CORRECTED DURING INSPECTION):</b> No handwashing signage provided at men's room handwashing sink.  <b>CORRECTIVE ACTION(S):</b> Provide handwashing signage at all handwashing sinks used by food employees. Correct By: 21-Mar-2014</p> <p><b>Good Retail Practices - 41 - In-use utensils: properly stored</b>  <b>OBSERVATION: (CORRECTED DURING INSPECTION):</b> Ice machine ice scoop was improperly stored in the open on top of the ice machine.  <b>CORRECTIVE ACTION(S):</b> Store in-use ice scoops in the ice with handle extended or in a clean, covered container. Correct By: 21-Mar-2014</p>

**Comments**

[Contact Sam \(785-9732\) with questions. Risk assessment and menu review conducted at 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



**Bridgette Wellendorf**

Sanitarian



**Sam Welch**  
**(608) 785-9732**