



Foodservice Establishment Inspection Report

<b>Establishment Information</b>	
Facility Name SPORTS NUT (THE)	Facility Type Restaurant
Facility ID # HSAT-7QXN9S	Facility Telephone # 608784-1811
Facility Address 801 ROSE ST LA CROSSE, WI 54603	
Licensee Name OLSON CHRISTOPHER	Licensee Address 803 ROSE ST LA CROSSE, WI 54603

<b>Inspection Information</b>		
Inspection Type Routine	Inspection Date 04/21/2016	Total Time Spent

<b>Equipment Temperatures</b>	
Description	Temperature (Fahrenheit)
Refrigeration	
Refrigeration	40, 41, 41

<b>Warewashing Info</b>						
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature
4 compartment bar sink	chemical				QA	
3 compartment kitchen sink	chemical				QA	

<b>Certified Manager</b>		
Name CHRISTOPHER E OLSON	Certificate # KBRN-9ACLLG	Certificate Expiration 04/28/2018

**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>
Total # 0

<b>Comments</b>

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



**Chris Olson**

Sanitarian



**Doug Schaefer**  
**(608) 785-9679**