



Retail Food Establishment Inspection Report

| Establishment Information | |
|--|--|
| Facility Name BANGOR HIGH SCHOOL | Facility Type DPI School |
| Facility ID # HSAT-7QWQJV | Facility Telephone # 608 786-3078 |
| Facility Address 700 10TH AVENUE SOUTH BANGOR , WI 54614 | |
| Licensee Name BANGOR SCHOOL DISTRICT | Licensee Address 700 10TH AVENUE SOUTH BANGOR , WI 54614 |

| Inspection Information | | |
|-----------------------------------|--------------------------------------|------------------|
| Inspection Type Routine | Inspection Date 10/27/2016 | Total Time Spent |

| Equipment Temperatures | |
|-------------------------------|--------------------------|
| Description | Temperature (Fahrenheit) |
| walk-in cooler | 36 |
| walk-in freezer | -3 |
| milk bunker | 39 |

| Food Temperatures | |
|--------------------------|--------------------------|
| Description | Temperature (Fahrenheit) |
| meatballs (hold) | 146, 143 |
| mashed potatoes (hold) | 144, 139 |
| chicken & gravy (hold) | 151, 148 |

| Warewashing Info | | | | | | |
|-------------------------|---------------------|--------------|----------|---|---------------------|-------------|
| Machine Name | Sanitization Method | Thermo Label | PPM | Sanitizer Name | Sanitizer Type | Temperature |
| wiping | chemical | - | 300, 400 | ProPower | QA | |
| buckets (2) | chemical | - | 50 | Quaternary Sanitizer | sodium hypochlorite | |
| dish machine | | | | ProPower Low Temp Chlorinated Sanitizer | | |

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 |
|--|
| No violations noted at inspection. 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


Colleen Kaiser

Sanitarian



Samuel Welch
(608) 785-9732