



West Virginia Department of Health & Human Resources

Beekley Health Department

FOOD ESTABLISHMENT INSPECTION REPORT

Violations cited in this report shall be corrected within the time frames specified below, but within a period not to exceed 72 hours of Priority items and 10 calendar days for Priority Foundation items or HACCP Plan deviations. (§ 64 C.S.R. 17-3.1.j.)

OBSERVATION TOTALS

PRIORITY: _____
CORE: _____

PRIORITY FOUNDATION: _____
TOTAL: _____

ESTABLISHMENT: <u>H-H Locales</u>		PERMIT NO.:		DATE: <u>8-3-19</u>	
ADDRESS:		CITY: <u>MIBA</u>		STATE: <u>LV</u> ZIP:	
PERSON IN CHARGE/TITLE: <u>X JINGLES KISNER</u>		TELEPHONE:			
RECEIVED BY (SIGNATURE): <u>X Jingles Kisner</u>		SANITARIAN (SIGNATURE): <u>Amey Edwards</u>			
INSPECTION TYPE: ROUTINE <input checked="" type="checkbox"/> FOLLOW-UP <input type="checkbox"/> COMPLAINT <input type="checkbox"/> OTHER: <u>Cancel</u>		TIME: <u>12:30</u>			

Corrected	Priority	Repeat	Code Reference	Violation Description/Remarks/Corrections
				✓ Hot-water H ₂ O soap provided
				✓ bleach
				✓ test strips
				✓ gloves
				✓ thermometer
				No violations

Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM
<u>1079</u>	<u>39</u>						