

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: _____

PRIORITY FOUNDATION: _____

CORE: _____

TOTAL: _____

ESTABLISHMENT: <u>Woodbriar BC</u>		PERMIT NO.:	DATE: <u>9-16-19</u>	
ADDRESS: <u>250 Top Flite Dr</u>		CITY: <u>Mtbg</u>	STATE: <u>WV</u> ZIP: <u>25401</u>	
PERSON IN CHARGE/TITLE: <u>Sharon Lynne Whittington</u>		TELEPHONE:		
RECEIVED BY (SIGNATURE): <u>[Signature]</u>		SANITARIAN (SIGNATURE):		
INSPECTION TYPE: ROUTINE <input checked="" type="checkbox"/> FOLLOW-UP <input type="checkbox"/> COMPLAINT <input type="checkbox"/> OTHER: <input type="checkbox"/>			TIME: <u>9:30</u>	
Corrected	Priority	Repeat	Code Reference	Violation Description/Remarks/Corrections
			<u>4-602.11</u>	<u>Top of Refrigerator needs dusted</u>
			<u>4-602.11</u>	<u>Area behind the grill needs cleaned</u>
			<u>6-506.11</u>	<u>Unit out of order at time of inspection - needs repaired</u>
<input checked="" type="checkbox"/>			<u>8-404.11</u>	<u>0% Chlorine in the water for kitchen & [washing] washing hands. Kitchen closed until repaired. \$7500 reinspection paid before reinspection can occur.</u>

Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM
<u>Fridge</u>	<u>39°F</u>						
<u>Beer cooler</u>	<u>38°F</u>						