WEST VIRGINIA Department of Health & Human Resources
BUREAU FOR PUBLIC HEALTH

# West Virginia Department of Health & Human Resources

Morgan County 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: 4 PRIORITY FOUNDATION: 4
CORE: 2 TOTAL: 2

ESTABLISHMENT: Berkeley Springs LLC PERMIT NO.: DATE: 1/6/2020
ADDRESS: CITY: Berkeley Springs STATE: WV ZIP: 25411
PERSON IN CHARGE/TITLE: Gabriella Hair TELEPHONE:
RECEIVED BY (SIGNATURE): SANITARIAN (SIGNATURE): TB
INSPECTION TYPE: ROUTINE ☑ FOLLOW-UP ☐ COMPLAINT ☐ OTHER: TIME: 1

| Corrected | Priority | Repeat | Code Reference | Violation Description/Remarks/Corrections |
|---|---|---|---|---|
| | | | 4-602.13 | Food residue in cooler needs cleaned. |
| | | | 4-602.12 | Food residue in microwave needs cleaned |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| Unit/Location/Item | Temp/PPM | Unit/Location/Item | Temp/PPM | Unit/Location/Item | Temp/PPM | Unit/Location/Item | Temp/PPM |
|---|---|---|---|---|---|---|---|
| Walk in freezer | 7 | Walk in cooler | 41 | | | | |
| Milk cooler | 37 | | | | | | |
| Milk cooler | 38 | | | | | | |
| cooler | 37 | | | | | | |