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

West Virginia Department of Health & Human Resources

Berkley 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 for **Priority** items and 10 calendar days for **Priority Foundation** items or **HACCP** Plan deviations. (§ 64 CSR 17-3.1.j).

OBSERVATIONS TOTALS: **PRIORITY** _____ **PRIORITY FOUNDATION** _____
CORE _____ **TOTAL** _____

Main Kitchen

ESTABLISHMENT: Board of CC-	**PERMIT NO.:**	**DATE:** 12-17-19	
ADDRESS: 715 Brown Rd	**CITY:** Berkley	**STATE:** WV	**ZIP:** 25404
PERSON IN CHARGE/TITLE: X Mark LaRose		**TELEPHONE:**	
RECEIVED BY (SIGNATURE): X	**SANITARIAN (SIGNATURE):** RS		
INSPECTION TYPE: ROUTINE ☑ FOLLOW-UP ☐ COMPLAINT ☐ OTHER:		**TIME:** 10 am	

Corrected	Priority	Repeat	Code Reference	Violation Description/Remarks/Corrections
☐		☐	6-501.11	Handsink in Kitchen leaking needs repaired
☐		☐	6-501.12	Corners of Drystock needs cleaned
☐		☐	6-501.11	Freezer need ice flow repaired
☐		☐	4-602.13	Spice shelf needs cleaned

Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM
Walk in Cooler	37F	Sanitizer	200-300	Dish	180		
2nd Walk in Cooler	40F	Hot Box	143F				
Delivered	36F	Soup	139F				
		Salad Bar	UT				