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

West Virginia Department of Health & Human Resources

Morgan 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:** _____ **PRIORITY FOUNDATION:** _____
CORE: _____ **TOTAL:** _____

ESTABLISHMENT: Fleur de Lis Cheese Shop	**PERMIT NO.:**		**DATE:** 3-13-20
ADDRESS: 15 Fairfax St.	**CITY:** Berkeley Springs	**STATE:** WV	**ZIP:** 25411
PERSON IN CHARGE/TITLE: Regina Gorsuch		**TELEPHONE:**	
RECEIVED BY (SIGNATURE): Regina Gorsuch	**SANITARIAN (SIGNATURE):** RS		
INSPECTION TYPE: ROUTINE ☒ FOLLOW-UP ☐ COMPLAINT ☐ OTHER:			**TIME:** 12:04

Corrected	Priority	Repeat	Code Reference	Violation Description/Remarks/Corrections
				No Violations at time of Inspection

Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM
Sm Cooler	40F						
Glass Cooler	38F						