

West Virginia Department of Health & Human  
Resources  
Morgan County Health Department



**FOOD ESTABLISHMENT INSPECTION REPORT**

<b>Establishment Information</b>		
Facility Name Lot 12	Facility Type Food Service Establishment	
Licensee Name (Owner Not Set)	Facility Telephone #	
Facility Address 117 Warren Street Berkeley Springs, WV	Licensee Address	
<b>Inspection Information</b>		
Inspection Type Routine	Inspection Date February 22, 2018	Total Time Spent 1.00

<b>Equipment Temperatures</b>	
Description	Temperature (Fahrenheit)
Freezer	-10
Cooler	39
Condiment Cooler	39
Bar Cooler	29

**OPERATOR** - Violations cited in this report shall be corrected within the time frames specified below, but within a period not to exceed 10 calendar days for critical items (§ 8-405.11) or 90 days for non-critical items (§ 8-406.11).

<b>Observed Critical Violations</b>
<b>Total # 0</b>
<b>Repeated # 0</b>


<b>Observed Non-Critical Violations</b>
<b>Total # 4</b>
<b>Repeated # 0</b>
<b>4-602.13 - NONFOOD CONTACT SURFACES</b> Observation: Food residue in condiment cooler. Corrective Action(s):
<b>4-602.13 - NONFOOD CONTACT SURFACES</b> Observation: Food residue in freezer. Corrective Action(s):
<b>4-602.13 - NONFOOD CONTACT SURFACES</b> Observation: Food residue in microwave. Corrective Action(s):
<b>6-501.11 - PHYSICAL FACILITIES - GOOD REPAIR</b> Observation: Cutting board needs replaced. Corrective Action(s):

**Inspection Outcome**

**Comments**

Disclaimer

Person in Charge

A handwritten signature in blue ink that reads "Boby Heath". The signature is written in a cursive style with a large initial 'B'.

Sanitarian

**Tim Zeigler**