

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: 5 PRIORITY FOUNDATION: 0
CORE: 15 TOTAL: 20

ESTABLISHMENT: Last Roundup PERMIT NO.: DATE: 12-10-20
ADDRESS: 10491 Winchester Ave CITY: Bunker Hill STATE: WV ZIP: 25413
PERSON IN CHARGE/TITLE: Jan Roach TELEPHONE: RECEIVED BY (SIGNATURE): Jan Roach SANITARIAN (SIGNATURE): Carla Handing RS
INSPECTION TYPE: ROUTINE FOLLOW-UP COMPLAINT OTHER: change of ownership TIME: 1:30

Corrected	Priority	Repeat	Code Reference	Violation Description/Remarks/Corrections
			5-203.13	Need mop sink installed
			6-501.11-1	Unnecessary items need removed from building (desk, freezer, equipment)
			6-501.12	Floor needs cleaned in corners especially
			4-501.11	Cabinet in poor repair
			6-501.12	Establishment needs a good over-all cleaning
	✓		4-101.11	Mouse droppings everywhere in establishment (walk ways, shelving)
	✓		4-101.11	2 live roaches & eggs (toilet)
			4-501.11	No hot water in ladies restroom
			6-501.11	Leaking 3 bay sink
			4-501.11	Mold under 3 bay sink
			4-101.11	Soda nozzle in standing water
				✓ pest control
				✓ copy of food code
				Manager-level food training needed

Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM



West Virginia Department of Health & Human Resources
Berkeley Co 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: 5
CORE: 15

PRIORITY FOUNDATION: 0
TOTAL: 20

ESTABLISHMENT: Last Roundup PERMIT NO.: _____ DATE: 12-10-20
 ADDRESS: 10491 Winchester Ave CITY: Bunker Hill STATE: WV ZIP: 25413
 PERSON IN CHARGE/TITLE: JAM ROACH TELEPHONE: _____
 RECEIVED BY (SIGNATURE): Jam Roach SANITARIAN (SIGNATURE): Carla Harding RS
 INSPECTION TYPE: ROUTINE FOLLOW-UP COMPLAINT OTHER: _____ TIME: _____

Corrected	Priority	Repeat	Code Reference	Violation Description/Remarks/Corrections
			6 501.11	Floor needs replacing replaced in gaming area
	✓		4-101.11	Open bin of ice needs covered
	✓		5-402.11	No air gap under sink Rust in bottom of ice bin
			4 501.11	Water filter on ice machine needs replaced
			6 501.115	Hole behind ice machine needs fixed & holes in other areas (behind bar & at machine) pest entry
				Antifreeze stored outside
			4 602.13	Refrigerator needs cleaned gaskets & shelves
	✓		3 501.17	Unlabeled & undated food in refrigerator
			6 501.11	Womens Restroom door has hole
			6 501.11	Paint turn in restroom w/ floor

Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM

Establishment must close Page 2 of 2
 immediately & can re-open only (\$75) once re-inspected by health dept. fee)