

Berkley 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: _____
CORE: _____

PRIORITY FOUNDATION: _____
TOTAL: 0

ESTABLISHMENT: Summer Shack PERMIT NO.: _____ DATE: May 5, 2021
 ADDRESS: 203 Bollinger Rd CITY: Lillestown STATE: PA ZIP: 17340
 PERSON IN CHARGE/TITLE: x Bonnie Hoffman TELEPHONE: 717-476-5165
 RECEIVED BY (SIGNATURE): Bonnie Hoffman SANITARIAN (SIGNATURE): Chap Edwards ES
 INSPECTION TYPE: ROUTINE FOLLOW-UP COMPLAINT OTHER: _____ TIME: 3pm

Corrected	Priority	Repeat	Code Reference	Violation Description/Remarks/Corrections
				No violations
				Inside unit, must wear face masks
				OK on re-inspect 2025
				gloves, hairnets, probe, wet strips, tablets

Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM
<u>top of case 25</u>		<u>freezer</u>	<u>-9</u>				