

**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.i.)

OBSERVATION TOTALS: PRIORITY: 2 PRIORITY FOUNDATION: 0  
CORE: 1 TOTAL: 3

ESTABLISHMENT: Corner Cafe PERMIT NO.: \_\_\_\_\_ DATE: 9-5-19  
 ADDRESS: 850 N. Terry CITY: Martinsburg STATE: WV ZIP: \_\_\_\_\_  
 PERSON IN CHARGE/TITLE: Y Bonnie Price TELEPHONE: 978-1111  
 RECEIVED BY (SIGNATURE): Bonnie Price SANITARIAN (SIGNATURE): \_\_\_\_\_

INSPECTION TYPE: ROUTINE  FOLLOW-UP  COMPLAINT  OTHER: \_\_\_\_\_ TIME: 9:14

Corrected	Priority	Repeat	Code Reference	Violation Description/Remarks/Corrections
✓	✓		3-501.18	Hand + clean 9-4, Turbidity pro. 9-4 d. Chl. 6.5 mg/L 9/3
✓	✓		3-501.18	Hot held sandwiches are prepared out. After 2 hours - using time as a control must track food & time in a log or use Temp 135F or higher at all times.
			4-602.13	lower black shelves need cleaned. esp. in back area of the shelves
				- MUST post INSPECTION on make your own sign to see inspection for customer or use sign provided by health Dept
				- Must w/ permit (renewal yearly) A copy of mgr level Health + Safety cert (ex. some state). Can use 1 for all hospital areas.

Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM
Sm cooler	41F						
Fridge L	40F						
Fridge R	39F						
Hot Sandwich	110F - 123F						