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

West Virginia Department of Health & Human Resources

MORGAN COUNTY **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: 0 PRIORITY FOUNDATION: 0
CORE: 0 TOTAL: 0

ESTABLISHMENT: VFW		PERMIT NO.:	DATE: 10/18/19
ADDRESS: 4490 VALLEY RD	CITY:	STATE:	ZIP:
PERSON IN CHARGE/TITLE: Linda L. Snidemiller		TELEPHONE:	
RECEIVED BY (SIGNATURE): Linda L. Snidemiller		SANITARIAN (SIGNATURE):	
INSPECTION TYPE: ROUTINE ☑ FOLLOW-UP ☐ COMPLAINT ☐ OTHER:			TIME:

Corrected	Priority	Repeat	Code Reference	Violation Description/Remarks/Corrections
				NO VIOLATIONS TO REPORT AT THIS TIME.

Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM	Unit/Location/Item	Temp/PPM
COOLER	40						
FREEZER	5.0						