



Retail Food Establishment Inspection Report

<b>Establishment Information</b>	
Facility Name TWO BEAGLES BREWPUB	Facility Type Restaurant
Facility ID # ASTS-A8SJL3	Facility Telephone # 608 797-6235
Facility Address 910 N 2ND AVE ONALASKA , WI 54650	
Licensee Name PETERS, STEVEN P	Licensee Address 403 CEDAR BIRD LN HOLMEN , WI 54636

<b>Inspection Information</b>		
Inspection Type Routine	Inspection Date September 13, 2017	Total Time Spent

<b>Equipment Temperatures</b>	
Description	Temperature (Fahrenheit)
walk in coolers	40,41
glass 3 door	41
Ascend	40
True	36
Delfield	35
True	41
Kaairak	40

<b>Food Temperatures</b>	
Description	Temperature (Fahrenheit)
hot holding	141, 145

<b>Warewashing Info</b>						
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature
Dich machine	chemical		100		chlorine	
bar 3C	chemical		nsu		chlorine	
kitchen 3C	chemical		nsu			
Glass washer	chemical		0/100			

**OPERATOR** - The violations in operating procedure or physical arrangement indicated below must be corrected by the next routine inspection or by a date specified in this report.

**Observed Violations**

**Total # 1**

**Risk/Intervention - 14 - Food-contact surfaces: cleaned and sanitized**

This is a priority item

**REPEAT OBSERVATION: (CORRECTED DURING INSPECTION):** The chlorine is not being used according to EPA registered label use instructions and is at 0 PPM.

**CORRECTIVE ACTION(S):** Provide training to employees on proper use and concentration of sanitizer or repair or adjust warewashing equipment to provide proper sanitizer concentration.

**CODE CITATION:** 4-501.114 A chemical SANITIZER used in a SANITIZING solution for a manual or mechanical operation at contact times specified under ¶ 4-703.11 (C) shall meet the criteria specified in § 7-204.11 SANITIZERS, Criteria, shall be used in accordance with the EPA-registered label use instructions, and shall be used as follows: [P]

(A) A chlorine solution shall have a minimum temperature based on the concentration and pH of the solution as listed in the following chart; [P]

Concentration	Range	Minimum Temperature	mg/L
pH 10 or less	°C (°F)	pH 8 or less	°C (°F)

25-49 49 (120) 49 (120)

50-99 38 (100) 24 (75)

100 13 (55) 13 (55)

(B) An iodine solution shall have a:

- (1) Minimum temperature of 20°C (68°F), [P]
- (2) pH of 5.0 or less or a pH no higher than the level for which the manufacturer specifies the solution is effective, [P] and
- (3) Concentration between 12.5 mg/L and 25 mg/L; [P]

(C) A quaternary ammonium compound solution shall: [P]

- (1) Have a minimum temperature of 24°C (75°F), [P]
- (2) Have a concentration as specified under § 7-204.11 and as indicated by the manufacturer's use directions included in the labeling, [P] and

(3) Be used only in water with 500 mg/L hardness or less or in water having a hardness no greater than specified by the EPA-registered label use instructions; [P]

(D) If another solution of a chemical specified under ¶¶ (A) to (C) of this section is used, the PERMIT/LICENSE HOLDER shall demonstrate to the DEPARTMENT that the solution achieves SANITIZATION and the use of the solution shall be APPROVED; [P] or

(E) If a chemical SANITIZER other than chlorine, iodine, or a quaternary ammonium compound is used, it shall be applied in accordance with the EPA-registered label use instructions and be approved by the DEPARTMENT. [P]

**Comments:**

[Christie and Steve Peters are ServSafe certified.](#)

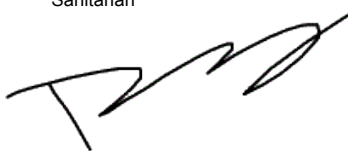
Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in ch.227 statute, if state licensed, or a local ordinance if licensed by an agent health department.

Person in Charge

Sanitarian



**Christie Peters**



**Doug Schaefer  
(608) 785-9679**