



Retail Food Establishment Inspection Report

Establishment Information	
Facility Name BENNETT O' RILEY'S	Facility Type Restaurant
Facility ID # MWAS-AQZNRV	Facility Telephone # 608 484-0246
Facility Address 213 S 3RD ST LA CROSSE , WI 54601	
Licensee Name HOUSEHOLDER, DARON	Licensee Address 915 TYLER ST LA CROSSE , WI 54601

Inspection Information		
Inspection Type Routine	Inspection Date September 25, 2018	Total Time Spent

Equipment Temperatures	
Description	Temperature (Fahrenheit)
Pizza freezer	0
Refrigeration - stand up cooler	32
Refrigeration - reach in cooler - beer only	29
Walk in cooler - basement	27.5
Basement freezers	0, 0

Food Temperatures	
Description	Temperature (Fahrenheit)
Cold hold -pickles - stand up cooler	40

Warewashing Info					
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type
3 compartment sink	Chemical		NSU	quaternary ammonium	

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.

Comments:
<ol style="list-style-type: none"> 1. Menu review and risk assessment conducted. - LOW complexity 2. Only frozen pizzas at this time, discussed adding new food items at a later date. 3. Discussed employee illness policy and exclusion 4. No violations noted during inspection.

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

A handwritten signature in black ink, appearing to read "DETID" followed by a horizontal flourish.A handwritten signature in black ink, appearing to read "Nicole Frankfourth" in a cursive style.

Nicole Frankfourth
(608) 785-9731