



Retail Food Establishment Inspection Report

Establishment Information	
Facility Name CHUCK'S	Facility Type Tavern
Facility ID # ASTS-8T9JM2	Facility Telephone # 608 785-0371
Facility Address 1101 LA CROSSE ST LA CROSSE , WI 54601-3552	
Licensee Name DEUCESWILD03 LLC	Licensee Address 1101 LA CROSSE ST LA CROSSE , WI 54601-3552

Inspection Information		
Inspection Type Routine	Inspection Date May 2, 2019	Total Time Spent

Equipment Temperatures	
Description Refrigeration walk in cooler	Temperature (Fahrenheit)

Warewashing Info					
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type
3 comp sink	Chemical		nsu		chlorine

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 # 2

Risk/Intervention - 08 - Adequate handwashing facilities supplied and accessible

This is a priority foundation item

OBSERVATION: Soap not available at food employee handwashing sink.

CORRECTIVE ACTION(S): Provide hand soap at handwashing sink to facilitate proper handwashing. Correct By: 02-May-2019

CODE CITATION: 6-301.11 Each HANDWASHING SINK or group of 2 adjacent HANDWASHING SINKS shall be provided with a supply of hand cleaning liquid, powder, or bar soap. [Pf]

Risk/Intervention - 08 - Adequate handwashing facilities supplied and accessible

This is a priority foundation item

OBSERVATION: No single-use toweling or other hand drying device available at handwashing sink for hand drying.

CORRECTIVE ACTION(S): Provide single-use toweling or other approved devices at handwashing sink to facilitate proper handwashing. Correct By: 02-May-2019

CODE CITATION: 6-301.12 Each HANDWASHING SINK or group of adjacent HANDWASHING SINKS shall be provided with:

(A) Individual, disposable towels; [Pf]

(B) A continuous towel system that supplies the user with a clean towel; Pf or

(C) A heated-air hand drying device; [Pf] or

(D) A hand drying device that employs an air-knife system that delivers high velocity, pressurized air at ambient temperatures.

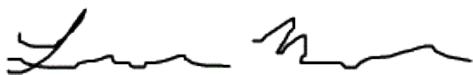
[Pf]

Comments:

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



Lauren Bernard



Doug Schaefer
(608) 785-9679