



Retail Food Establishment Inspection Report

Establishment Information	
Facility Name INDIAN MEAL KIT	Facility Type Mobile Retail Food Establishment
Facility ID # MWAS-AMQLU7	Facility Telephone # 608 782-8020
Facility Address 1100 KANE ST LA CROSSE , WI 54603	
Licensee Name INDIAN MEAL KIT LLC	Licensee Address 609 N 13TH ST LA CRESCENT , MN 55947

Inspection Information		
Inspection Type Routine	Inspection Date June 11, 2019	Total Time Spent

Equipment Temperatures	
Description walk-in cooler Reach in freezer	Temperature (Fahrenheit) 36 FN

Warewashing Info					
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type
dish machine	chemical		100		Chlorine
3 compartment sink	chemical		NSU		

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:
CFM course was taken and passed September 2018, certificate was never sent, has made several calls but still could not obtain. Will try to contact again and send via email. Discussed employee health. No violations at time of 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

Puja Mehta

**Amanda Ramos
(608) 785-9771**