



Retail Food Establishment Inspection Report

Establishment Information	
Facility Name KWIK TRIP # 826	Facility Type Large Potentially Hazardous
Facility ID # ASTS-8S5TD7	Facility Telephone # 608 788-8664
Facility Address 4605 MORMON COULEE RD LA CROSSE , WI 54602	
Licensee Name KWIK TRIP, INC.	Licensee Address PO BOX 2107 LA CROSSE , WI 54602

Inspection Information		
Inspection Type Routine	Inspection Date August 27, 2018	Total Time Spent

Equipment Temperatures	
Description	Temperature (Fahrenheit)
walk-in cooler	40
prep top cooler	39
condiment cooler	33
creamer cooler	38
meat cooler	38
sandwich display	33
yogurt display	38

Food Temperatures	
Description	Temperature (Fahrenheit)
recieving eggs	42
cold hold sliced tomato	40
hot hold soup	142

Warewashing Info					
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type
four 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.

Observed Violations

Total # 1

Risk/Intervention - 1A - Certified food manager: duties

This is a core item

OBSERVATION: There is no approved food manager's certificate posted in the food establishment.

CORRECTIVE ACTION(S): Provide & post an original State of Wisconsin, 360/Learn2Serve, Food Safety Professionals, Prometric, ServSafe or recertification for small operators food manager's certificate. Correct By: 03-Sep-2018

CODE CITATION: 12-201.11(C) A FOOD ESTABLISHMENT shall post a certificate issued by the DEPARTMENT under this section in a conspicuous place on the premises of the FOOD ESTABLISHMENT.

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



desiree dumale



Aron Newberry
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