



Retail Food Establishment Inspection Report

<b>Establishment Information</b>	
Facility Name <b>LEROY'S GRILL LLC</b>	Facility Type <b>Mobile Service Base</b>
Facility ID # <b>ASTS-8U3SGG</b>	Facility Telephone # <b>608 780-5317</b>
Facility Address <b>W3204 COUNTY RD M LA CROSSE , WI 54601</b>	
Licensee Name <b>LEROY'S GRILL, LLC</b>	Licensee Address <b>W3204 COUNTY RD M LA CROSSE , WI 54601</b>

<b>Inspection Information</b>		
Inspection Type <b>Routine</b>	Inspection Date <b>June 17, 2019</b>	Total Time Spent

<b>Equipment Temperatures</b>	
Description <b>Chest Freezer 1</b>	Temperature (Fahrenheit) <b>-8</b>
<b>Chest Freezer 2</b>	<b>-4</b>

<b>Certified Manager</b>		
Name <b>TONIA L NOFSINGER</b>	Certificate # <b>DOGD-9U7BZ9</b>	Certificate Expiration <b>5/13/2020</b>

**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.

<b>Comments:</b>
<a href="#">No violations noted at inspection. Contact Sam (785-9732) with questions. Cold storage and dry dry good storage only. Potable water taken on and waste water discharged at Fort McCoy.</a>

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

**Leroy Nofsinger**

**Samuel Welch  
(608) 785-9732**