



LA CROSSE COUNTY

Retail Food Establishment Inspection Report

<b>Establishment Information</b>	
Facility Name <b>MY PLACE</b>	Facility Type <b>Restaurant</b>
Facility ID # <b>ASTS-9KYMDV</b>	Facility Telephone # <b>608 788-9073</b>
Facility Address <b>3201 SOUTH AVE LA CROSSE , WI 54601</b>	
Licensee Name <b>B ANDERSON HOLDINGS LLC</b>	Licensee Address <b>3201 SOUTH AVE LA CROSSE , WI 54601</b>

<b>Inspection Information</b>		
Inspection Type <b>Routine</b>	Inspection Date <b>December 19, 2018</b>	Total Time Spent

<b>Equipment Temperatures</b>	
Description	Temperature (Fahrenheit)
reach-in coolers	33
walk in cooler	40
undercounter cooler	33

<b>Warewashing Info</b>					
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type
4 compartment sink	chemical		200	QA	

**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="#">Provided a copy of the employee reporting agreement.</a>

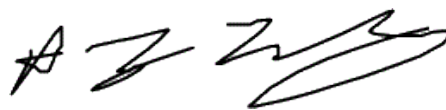
Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in ch.227 statute, if state licensed, or a local ordinance if licensed by an agent health department.

Person in Charge



**nathan sawtelle**

Sanitarian



**Aron Newberry**  
**(608) 785-9730**