



Retail Food Establishment Inspection Report

Establishment Information	
Facility Name SPILLWAY PUB, THE	Facility Type Restaurant
Facility ID # ASTS-8V2S7D	Facility Telephone # 608 519-1773
Facility Address 209 IRVIN ST ONALASKA , WI 54650	
Licensee Name SPILLWAY INVESTMENTS LLC	Licensee Address 112 MILL ST HOLMEN , WI 54636

Inspection Information		
Inspection Type Routine	Inspection Date October 23, 2017	Total Time Spent

Warewashing Info						
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature
4 compartment bar sink	chemical		400		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.

Observed Violations
<p>Total # 1</p> <p>Risk/Intervention - 08 - Adequate handwashing facilities supplied and accessible</p> <p>This is a core item</p> <p>OBSERVATION: No handwashing signage provided at rest room handwashing sink.</p> <p>CORRECTIVE ACTION(S): Provide handwashing signage at all handwashing sinks used by food employees. Correct By: 23-Oct-2017</p> <p>CODE CITATION: 6-301.14 A sign or poster that notifies FOOD EMPLOYEES to wash their hands shall be provided at all HANDWASHING SINKS used by FOOD EMPLOYEES and shall be clearly visible to FOOD EMPLOYEES.</p>

Comments:
Remove bacon from freezer and old gravy from walk in cooler.

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

clarissa erickson

Doug Schaefer
(608) 785-9679