



Retail Food Establishment Inspection Report

<b>Establishment Information</b>	
Facility Name <b>SUSHI WITH GUSTO</b>	Facility Type <b>Small Potentially Hazardous</b>
Facility ID # <b>MWAS-ARCKSQ</b>	Facility Telephone # <b>877 707-8744</b>
Facility Address <b>9515 STATE RD 16 ONALASKA, WI 54650</b>	
Licensee Name <b>SUSHI WITH GUSTO</b>	Licensee Address <b>508 PENNSYLVANIA AVE GREER, SC 29650</b>

<b>Inspection Information</b>		
Inspection Type <b>Routine</b>	Inspection Date <b>January 6, 2020</b>	Total Time Spent

<b>Equipment Temperatures</b>	
Description	Temperature (Fahrenheit)
Refrigeration - Prep cooler	29
Walk in cooler	33
Display cooler	36

<b>Warewashing Info</b>					
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type
Wiping bucket	Chemical		200		QA
3C sink (meat room)	Chemical				

**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="#">CFM: Salai Pushes 4/29/20</a> <a href="#">Discussed corrective action recording</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

**Salai Pushes**

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