



FOOD ESTABLISHMENT INSPECTION REPORT

Violations cited in this report shall be corrected within the time frames specified below, but within a period not to exceed 10 calendar days for critical items (§ 8-405.11) or 90 days for non-critical items (§ 8-406.11).

NUMBER OF VIOLATIONS: CRITICAL 0 NONCRITICAL 3 TOTAL 3

| ESTABLISHMENT: FOOD LION #807 | | | PERMIT NO.: FE-33-06-10-10-01 | | DATE: 4/12/11 | |
|---|--------------------------|-------------------------------------|--------------------------------------|--|-----------------------------|--------------|
| ADDRESS: 200 MORGAN SQ | | | CITY: BERKELEY SPRINGS | | STATE: WV ZIP: 25411 | |
| PERSON IN CHARGE / TITLE: | | | | TELEPHONE: | | |
| RECEIVED BY (SIGNATURE): | | | | SANITARIAN (SIGNATURE): | | |
| INSPECTION TYPE: ROUTINE <input checked="" type="checkbox"/> FOLLOW-UP <input type="checkbox"/> COMPLAINT <input type="checkbox"/> OTHER: <input type="checkbox"/> | | | | | | TIME: |
| Corrected | Critical | Repeat | Code Reference | Violation Description / Remarks / Corrections | | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5-501.17 | Ladies restroom need covered trash receptacle | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6-201.11 | Water on floor in meat cooler | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6-201.11 | Deli: Protective shields needed on light bulbs | | |
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| Unit/Location/Item | Temp/PPM | Unit/Location/Item | Temp/PPM | Unit/Location/Item | Temp/PPM | Unit/Location/Item | Temp/PPM |
|--------------------|----------|--------------------|----------|--------------------|----------|--------------------|----------|
| all units ok | | | | | | | |
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