

MDH

11 E Superior Street Duluth 218-302-6166

 Type:
 Full

 Date:
 03/05/24

 Time:
 10:21:08

 Report:
 1032241047

# Food and Beverage Establishment Inspection Report

Page 1

### - Location<del>:</del>

Myers-Wilkins Elementary 1027 North 8th Avenue East Duluth, MN558051426 St. Louis County, 69

License Categories: FAIF, FBLB, HOSP, FBSC, FBC2

Expires on: 12/31/24

Establishment Info: ID #: 0022241 Risk: High Announced Inspection: No

**Operator:** Ind. School District No. 709

Phone #: 2183368707

ID #: 27942

The violations listed in this report include any previously issued orders and deficiencies identified during this inspection. Compliance dates are shown for each item.

No NEW orders were issued during this inspection.

### **Surface and Equipment Sanitizers**

Chlorine: = at 100PPM Degrees Fahrenheit Location: SANI BUCKET X2 Violation Issued: No

Hot Water: = at 160 Degrees Fahrenheit Location: DISHWASHER Violation Issued: No

#### **Food and Equipment Temperatures**

Process/Item: Milk Carton Server Temperature: 40 Degrees Fahrenheit - Location: MILK Violation Issued: No Process/Item: Upright Cooler Temperature: 40 Degrees Fahrenheit - Location: SOY MILK Violation Issued: No Process/Item: Upright Cooler Temperature: 39 Degrees Fahrenheit - Location: APPLE SAUCE Violation Issued: No

Process/Item: Walk-In Cooler

Temperature: 40 Degrees Fahrenheit - Location: CHEDDAR CHEESE

Violation Issued: No

Process/Item: Walk-In Cooler Temperature: 38 Degrees Fahrenheit - Location: PIZZA Violation Issued: No 
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 Myers-Wilkins Elementary

# Food and Beverage Establishment Inspection Report

Process/Item: Walk-In Cooler Temperature: 39 Degrees Fahrenheit - Location: MILK Violation Issued: No

Process/Item: Walk-In Freezer Temperature: Degrees Fahrenheit - Location: FROZEN Violation Issued: No

Total Orders In This ReportPriority 1Priority 2Priority 3000

Report reviewed with manger roberta. Potential hazards in day-to-day operation were discussed, including employee illness, excluding/restricting employees experiencing illness symptoms, recording employee illness symptoms,

NOTE: Plans and specifications must be submitted for review and approval prior to new construction, remodeling or alterations.

I acknowledge receipt of the MDH inspection report number 1032241047 of 03/05/24.

Certified Food Protection Manager<u>ROBERTA R TARAN</u>

Certification Number: <u>FM24359</u> Expires: <u>04/28/25</u>

Inspection report reviewed with person in charge and emailed.

Signed:

Signed: 50

ROBERTA R TARAN KITCHEN MANAGER Ben Kubes Environmental Health Specialist Duluth ben.kubes@state.mn.us

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	11 E Superior Street				No. of Repeat RF/PHI Categories Out			0	Time In 10	10:21:08	
EPARTMENT OF HEALTH	Duluth								Time Out	ime Out	
lyers-Wilkins Elem	entary	Address 1027 North 8th Avenue East			City/State			Zip Code 558051426		<b>phone</b> 3368707	
icense/Permit #		Permit Holder			Purpose of Inspection		Est Type	Risk Cate		gory	
0022241 Ind. School District No. 709					Full			Н			
		BORNE ILLNESS RISK FAC		S AN	ID PUBLI	C HEAL	TH INTERV	ENTIONS			
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