

## Retail Food Establishment Inspection Report

| <b>Establishment Information</b>                                   |  |
|--|--|
| Facility Name<br><b>CORNER PUB</b>                                 | Facility Type<br><b>Retail Food - Serving Meals</b>                    |
| Facility ID #<br><b>HSAT-7QWT54</b>                                | Facility Telephone #<br><b>920 073-1097</b>                            |
| Facility Address<br><b>1123 N MASON ST<br/>APPLETON , WI 54914</b> |  |
| Licensee Name<br><b>KIM-RICK WILLIAMS</b>                          | Licensee Address<br><b>1123 N MASON ST<br/>APPLETON , WI<br/>54914</b> |

| <b>Inspection Information</b>     |  |                  |
|-----------------------------------|--|------------------|
| Inspection Type<br><b>Routine</b> | Inspection Date<br><b>May 30, 2023</b> | Total Time Spent |

| <b>Equipment Temperatures</b>                      |                          |
|--|--------------------------|
| Description<br>walkin beer cooler<br>pizza freezer | Temperature (Fahrenheit) |

| <b>Warewashing Info</b> |                     |              |     |                |                |
|-------------------------|---------------------|--------------|-----|----------------|----------------|
| Machine Name            | Sanitization Method | Thermo Label | PPM | Sanitizer Name | Sanitizer Type |
| manual                  | bleach              |              |     |                |                |

**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>  |
|---|
| <p>Water pipe broke in rental over bar. Ceiling down to rafters, walls have stud exposed. Can lighting hanging down. Bar needs to be essentially put back together and have all departments sign off prior to reopening. Fire, HVAC, Building, Plumbing, Electrical and Health will all need to come through and inspection prior to opening back up for business.</p> <p>Re attach the faucet on the 4 compartment sink. (Faucet is onsite)</p> <p>Report will be mailed to 200 E. Harding Drive 54915</p> |

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

  
**Rick Williams**

  
**Michelle Roberts**  
**(920) 832-6429**