

Minnesota Department of Health Environmental Health Division 12 Civic Center Plaza Mankato 507-344-2727

Type: Full
Date: 09/27/24
Time: 10:35:00
Report: 6504241088

Food and Beverage Establishment Inspection Report

Page 1

Location:

Bridgewater Elementary Marie Kyllo, Child Nut. Manage 401 Jefferson Parkway

Northfield, MN55057 Rice County, 66

License Categories:

FAIF, FBLB, HOSP, FBSC, FBC2

Expires on: 12/31/24

Establishment Info:

ID #: 0013901 Risk: High

Announced Inspection: No

Operator:

Ind. School District No. 659

Phone #: 5076643324

ID#: 15696

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.

Total Orders In This Report Priority 1 Priority 2 Priority 3
0 0 0

WALK-IN COOLER: 32F; WALK-IN FREEZER: -1F; HOBART #3: 33F; MILK COOLER: 32F; HOT HOLD: GREEN BEANS, 156F: NOODLES, 156F; DISH WASHER UTENSIL SURFACE TEMPERATURE: 160F WITH LABELS

REPORT E-MAILED TO: sstromme@northfieldschools.org

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

I acknowledge receipt of the Minnesota Department of Health inspection report number 6504241088 of 09/27/24.

Certified Food Protection Manager Marie A. Kyllo

Certification Number: 64139 Expires: 08/12/27

Inspection report reviewed with person in charge and emailed.

Signed: ____Marie Kyllo

FSD

Signed:

David Reimann Environmental Health Specialist Mankato District Office 507-344-2727

david.reimann@state.mn.us

	Minnesota Depa			nent Inspection Report No. of RF/PHI Categories Out 0 Date								
	Environmental I				No. of Repeat RF/PHI Categories Out			gories Out	10	Date 09/27/ Time In 10:35:		
DEPARTMENT OF HEALTH	Mankato		Legal Authority MN Rules Chapter 4626						Time Out			
Bridgewater Elemen	tary	Address Marie Kyllo, Child Nut. Manage			1 -	/State			Zip Code 55057		phone 6643324	
License/Permit #		Permit Holder					of Inspection	on	Est Type	307	Risk Catego	ry
0013901		Ind. School District No. 659			Ful	İ	<u> </u>				Н	
		BORNE ILLNESS RISK FAC		RS A	ND P	UBL	IC HEAL					
Circle des	signated compliance stated on the control of the co	atus (IN, OUT, N/O, N/A) for each numbered npliance N/O= not observed		J/A = n	ot applica	ahla	cc		"X" in appropriate box -site during inspection		S and/or R R= repeat vi	olatio
· ·		NOT NOT OBSERVED					pliance St		-site during inspection		K= repeat vi	_
Compliance S	เสเนธ	Surpervision	CO	\$ R		Com	pilarice St		mperature Contro	l for Sa	ifaty	С
1 (IN) OUT	PIC knowledgeat	ble; duties & oversight	T		18(O (NI	UT N/A N/C		ing time & tempera		licty	
2 (IN)OUT N/A		stection manager, duties			\rightarrow	-	UT N/A(N/C		ating procedures for		oldina	+
-	E	mployee Health			-		UT N/A(N/C	4	ng time & temperat		g	
3 (IN) OUT	Mgmt/Staff;know	ledge,responsibilities&reporting			21	O NI	UT N/A N/C	4— <u> </u>	olding temperature			
4 (IN) OUT	Proper use of rep	orting, restriction & exclusion			—		UT N/A	<u> </u>	holding temperatur			
5 (IN) OUT		sponding to vomiting & diarrheal			→	${ extstyle -}$	UT N/A N/C	<u> </u>	marking & disposit			
,, ooi	events	Hygenic Practices	<u> </u>			-	UT(N/A) N/C		ublic health control		dures & records	+
6 (IN) OUT N/O	1	sting, drinking, or tobacco use			- 1				nsumer Advisory			
- 14/C		m eyes, nose, & mouth		\dashv	25	IN O	UT(N/A)		dvisory provided for		ndercooked for	d
, 117 001 14/0		Contamination by Hands							usceptible Popula			
8 IN) OUT N/	O Hands clean & p	•			26	IN O	UT(N/A)		foods used; prohib		ods not offered	
	No bare hand co	ntact with RTE foods or pre-approved	П	\neg				Food and C	color Additives an	d Toxic	Substances	_
9 (IN) OUT N/A N/		dure properly followed			27	IN O	UT(N/A)	Food additiv	es: approved & pro	operly u	sed	
10(IN) OUT	<u> </u>	rashing sinks supplied/accessible			28	IN) O	UT		ances properly ider			
1(IN)OUT		oroved Source om approved source						1	e with Approved			
\sim $-$			\vdash	\dashv	29	IN O	UT(N/A)	Compliance	with variance/spec	cialized	process/HACC	P
12 IN OUT N/A N/O	4	proper temperature										
13(IN) OUT	Food in good cor	100										
13(11) 001		ndition, safe, & unadulterated										
	Required records	available; shellstock tags,		-			(DE)			_ : 1	6-1	
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