



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

Type: Full
 Date: 09/27/24
 Time: 11:49:00
 Report: 6504241091

Food and Beverage Establishment Inspection Report

Page 1

Location:

Greenvale Park Elementary
 500 Lincoln Parkway
 Northfield, MN55057
 Rice County, 66

Establishment Info:

ID #: 0036480
 Risk: Medium
 Announced Inspection: No

License Categories:

HOSP, FBLB, FBSC, FBC2

Expires on: 12/31/24

Operator:

Ind. School District - Northfi

Phone #: 5076453509

ID #: 54160

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	0

WALK-IN COOLER: 36F; WALK-IN FREEZER: -5F; TRUE REFRIGERATOR: 36F; MILK COOLER: 36F;
 HOT HOLD: SPAGHETTI SAUCE: 159F, 166F; COLD LINE: SALAD: 41F; DISH WASHER UTENSIL
 SURFACE TEMPERATURE: 163F WITH DISK.

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 6504241091 of 09/27/24.

Certified Food Protection Manager Lindsey M. Dietiker

Certification Number: 84982 Expires: 07/15/25

Inspection report reviewed with person in charge and emailed.

Signed: E-mailed
 Lindsey Dietiker
 FSD

Signed: David Reimann
 David Reimann
 Environmental Health Specialist
 Mankato District Office
 507-344-2727
 david.reimann@state.mn.us

Report #: 6504241091

Food Establishment Inspection Report



Minnesota Department of Health
Environmental Health Division
12 Civic Center Plaza
Mankato

No. of RF/PHI Categories Out 0

Date 09/27/24

No. of Repeat RF/PHI Categories Out 0

Time In 11:49:00

Legal Authority MN Rules Chapter 4626

Time Out

Greenvale Park Elementary
Address
500 Lincoln Parkway

City/State
Northfield, MN

Zip Code
55057

Telephone
5076453509

License/Permit #
0036480

Permit Holder
Ind. School District - Northfi

Purpose of Inspection
Full

Est Type

Risk Category
M

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item

Mark "X" in appropriate box for COS and/or R

IN= in compliance

OUT= not in compliance

N/O= not observed

N/A= not applicable

COS= corrected on-site during inspection

R= repeat violation

Compliance Status		COS	R
Supervision			
1	IN OUT		
2	IN OUT N/A		
Employee Health			
3	IN OUT		
4	IN OUT		
5	IN OUT		
Good Hygienic Practices			
6	IN OUT N/O		
7	IN OUT N/O		
Preventing Contamination by Hands			
8	IN OUT N/O		
9	IN OUT N/A N/O		
10	IN OUT		
Approved Source			
11	IN OUT		
12	IN OUT N/A N/O		
13	IN OUT		
14	IN OUT N/A N/O		
Protection from Contamination			
15	IN OUT N/A N/O		
16	IN OUT N/A		
17	IN OUT		

Compliance Status		COS	R
Time/Temperature Control for Safety			
18	IN OUT N/A N/O		
19	IN OUT N/A N/O		
20	IN OUT N/A N/O		
21	IN OUT N/A N/O		
22	IN OUT N/A		
23	IN OUT N/A N/O		
24	IN OUT N/A N/O		
Consumer Advisory			
25	IN OUT N/A		
Highly Susceptible Populations			
26	IN OUT N/A		
Food and Color Additives and Toxic Substances			
27	IN OUT N/A		
28	IN OUT		
Conformance with Approved Procedures			
29	IN OUT N/A		

Risk factors (RF) are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions (PHI) are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is not in compliance

Mark "X" in appropriate box for COS and/or R

COS= corrected on-site during inspection

R= repeat violation

Compliance Status		COS	R
Safe Food and Water			
30	IN OUT N/A		
31			
32	IN OUT N/A		
Food Temperature Control			
33			
34	IN OUT N/A N/O		
35	IN OUT N/A N/O		
36			
Food Identification			
37			
Prevention of Food Contamination			
38			
39			
40			
41			
42			

Compliance Status		COS	R
Proper Use of Utensils			
43			
44			
45			
46			
Utensil Equipment and Vending			
47			
48			
49			
Physical Facilities			
50			
51			
52			
53			
54			
55			
56			
57			
58			

Food Recalls:

Person in Charge (Signature) *E-mailed*

Date: 09/29/24

Inspector (Signature) *R. Rein*