

Recreational Educational Camp Inspection Report

| Establishment Information | |
|---|---|
| Facility Name CAMP BIRCHROCK | Facility Type Recreational/Educational Camp (RRE) |
| Facility ID # SYOG-7QRVRB | Facility Telephone # 715 282-5547 |
| Facility Address | |
| Licensee Name CAMP FIRE USA ONEIDA COUNCIL INC | Licensee Address |
| | |

| Inspection Information | | | |
|------------------------|-----------------|------------------|--|
| Inspection Type | Inspection Date | Total Time Spent | |
| Routine | July 12, 2022 | | |

| Equipment Temperatures | |
|------------------------|--------------------------|
| Description | Temperature (Fahrenheit) |
| Walk in refrigerator | 38 |

| Food Temperatures | |
|------------------------|--------------------------|
| Description | Temperature (Fahrenheit) |
| yogurt, walk in cooler | 32 |

| Warewashing Info | | | | | |
|---|---------------------|--------------|-----|----------------|----------------|
| Machine Name | Sanitization Method | Thermo Label | PPM | Sanitizer Name | Sanitizer Type |
| Manual wiping cloth bucket and spray bottle | 3 compartment sink | | 100 | bleach | chlorine |

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.

Comments:

CFM: Julie Breivogel, cert #22359834, exp. 7/11/27; also Lexi Morrison cert #22359833

Day campers 40/week; Resident campers 10/week; 5 counselors, 3 lifeguards

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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

Nicole Reinke

Jody McKinney (715) 369-6226

ed Hiting, R.S.