



Type: Full  
Date: 10/08/24  
Time: 11:00:00  
Report: 1016241152

# Food and Beverage Establishment Inspection Report

**Location:**

Lowell Elementary  
2000 Rice Lake Rd  
Duluth, MN55811  
St. Louis County, 69

**Establishment Info:**

ID #: 0022246  
Risk: High  
Announced Inspection: No

**License Categories:**

FAIF, FBLB, HOSP, FBSC, FBC2

Expires on: 12/31/24

**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

Hot Water: = at 168 Degrees Fahrenheit  
Location: DISH WASHER  
Violation Issued: No

Chlorine: = 50 PPM at Degrees Fahrenheit  
Location: WIPING CLOTH BUCKET  
Violation Issued: No

## Food and Equipment Temperatures

Process/Item: Walk-In Cooler  
Temperature: 38 Degrees Fahrenheit - Location: KIWI  
Violation Issued: No

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

Process/Item: Upright Cooler  
Temperature: 40 Degrees Fahrenheit - Location: JUICE  
Violation Issued: No

Process/Item: Milk Cooler  
Temperature: 38 Degrees Fahrenheit - Location: MILK  
Violation Issued: No

Process/Item: Milk Cooler  
Temperature: 38 Degrees Fahrenheit - Location: MILK  
Violation Issued: No

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

Process/Item: Hot Holding  
Temperature: 163 Degrees Fahrenheit - Location: MAC AND CHEESE  
Violation Issued: No

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

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**COMMENTS:**

DISCUSSED THE IMPORTANCE OF FREQUENT HAND WASHING BY ALL STAFF, AS WELL AS LIMITING BARE HAND CONTACT WITH ALL READY TO EAT FOODS. STAFF HAVE GLOVES AVAILABLE. USE GLOVES WITH ALL READY TO EAT FOODS AND CHANGE GLOVES FREQUENTLY AND ANY TIME TASKS ARE CHANGED.

DISCUSSED THE EMPLOYEE ILLNESS POLICY AND THE EXCLUSION OF EMPLOYEES SICK WITH SYMPTOMS OF VOMITING AND/OR DIARRHEA UNTIL 24 HOURS AFTER THEIR LAST SYMPTOM.

CONTACT THE DEPARTMENT OF HEALTH IF ANY EMPLOYEES ARE DIAGNOSED WITH SALMONELLA, SHIGELLA, SHIGA TOXIN-PRODUCING E. COLI, HEPATITIS A. VIRUS, NOROVIRUS, OR ANOTHER BACTERIAL, VIRAL OR PARASITIC PATHOGEN OR IF THERE ARE ANY CUSTOMER ILLNESS COMPLAINTS.

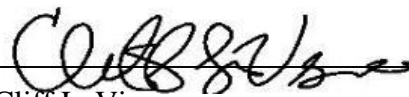
**NOTE: Plans and specifications must be submitted for review and approval prior to new construction, remodeling or alterations.**

I acknowledge receipt of the Minnesota Department of Health inspection report number 1016241152 of 10/08/24.

Certified Food Protection Manager: AMIE CLINGMAN

Certification Number: FM100350 Expires: 08/14/25

Signed: \_\_\_\_\_  
AMIE CLINGMAN  
KITCHEN MANAGER

Signed:  \_\_\_\_\_  
Cliff LaVigne  
Sanitarian  
Duluth  
2183026181  
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