

## BRIDGEWATER TOWNSHIP SANITARY INSPECTION REPORT

IDENTIFICATION					
<b>OWNER INFORMATION</b> <i>(Complete this section only if different from establishment information)</i>			<b>ESTABLISHMENT INFORMATION</b>		
NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT			ESTABLISHMENT TRADING NAME <i>Houlihan's</i>		
NUMBER AND STREET		COUNTY	NUMBER AND STREET		COUNTY
			<i>1288 Route 22 East</i>		<i>Somerset</i>
MUNICIPALITY		STATE	MUNICIPALITY	ZIP CODE	TELEPHONE NO.
			<i>Bridgewater</i>	<i>08807</i>	
ZIP CODE	COMUN. CODE		ESTABLISHMENT STATE LICENSE NO. (if appl.)	COMUN. CODE	
INSPECTION					
<b>TYPE OF ESTABLISHMENT</b>		<b>ESTABLISHMENT CODE</b>		<input type="checkbox"/> INITIAL INSPECTION	
<input checked="" type="checkbox"/> RETAIL				<input checked="" type="checkbox"/> REINSPECTION <i>(other than initial inspection)</i>	
<input type="checkbox"/> POOL		<b>GOODS</b>		<b>TIME - (2400 HOURS)</b>	
<input type="checkbox"/> CAMP		<input type="checkbox"/> DESTROYED		DATE	BEGIN
<input type="checkbox"/> OTHER		<input type="checkbox"/> EMBARGOED		<i>3/15/2021</i>	END
<b>EVALUATION</b>					
<input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> CONDITIONALLY SATISFACTORY <input type="checkbox"/> UNSATISFACTORY					
OFFICIAL(S)					
<b>LOCAL BOARD OF HEALTH</b>			<b>INSPECTING OFFICIAL</b>		
NAME, ADDRESS AND TELEPHONE NUMBER  <i>Bridgewater Township 100 Commons Way Bridgewater, N.J. 08807 908-725-5750</i>			INSPECTOR'S NAME AND TITLE <i>Patricia Timko Parker R.E.H.S.</i>		
			INSPECTOR'S SIGNATURE <i>Patricia Timko Parker</i>		
HEALTH OFFICER <i>Kevin Sommer</i>			INSPECTOR'S PERM. REG. NO. <i>B1934</i>		

# CONTINUATION SHEET

(for Inspections, Surveys, Audits, etc.)

Name (Individual, Facility, Establishment, etc.)

HOUTIKANS

Date

3/15/2021

BRIDGEWATER TOWNSHIP

Item  
No.

Remarks

All violations from 2/12/2021 have been  
abated.

Rating Satisfactory

Signature of Individual Completing Form

*John P. [Signature]*

Signature of Owner of Facility, Establishment, etc. if required

*[Signature]*

PAGE

OF

PAGES