



# State of Maine Health Inspection Report

<b>Establishment Name</b> WHAT AH DAWG		<i>As Authorized by 22 MRSA § 2496</i>		<b>Date</b> <u>5/24/2019</u>
<b>License Expiry Date/EST. ID#</b> 5/22/2020 / 28122	<b>Address</b> STATE WIDE MOBILE	<b>City / State</b> PORTLAND / ME	<b>Zip Code</b> 04010	<b>Telephone</b> 207-289-5444

## Temperature Observations

Location	Temperature	Notes
HOT WATER	110F	

Person in Charge (Signature)

PIC SIGNED PAPER COPY

Date: 5/24/2019

Health Inspector (Signature)

Tom Williams

TOM WILLIAMS

# State of Maine Health Inspection Report

Page 3 of 4

Establishment Name

WHAT AH DAWG

Date 5/24/2019

License Expiry Date/EST. ID#  
5/22/2020 / 28122

Address  
STATE WIDE MOBILE

City / State  
PORTLAND

ME

Zip Code  
04010

## Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 and 8-406.11 of the Food Code

Person in Charge (Signature)

*PIC SIGNED PAPER COPY*

Date: 5/24/2019

Health Inspector (Signature)

*Tom Williams*

TOM WILLIAMS

# State of Maine Health Inspection Report

Page 4 of 4

Establishment Name

WHAT AH DAWG

Date 5/24/2019

License Expiry Date/EST. ID#  
5/22/2020 / 28122

Address  
STATE WIDE MOBILE

City / State  
PORTLAND ME

Zip Code  
04010

## Inspection Notes

PRE-OPERATIONAL INSPECTION OF NEW FOOD TRAILER.  
OK TO ISSUE LICENSE.

Person in Charge (Signature)

*PIC SIGNED PAPER COPY*

Date: 5/24/2019

Health Inspector (Signature)

TOM WILLIAMS

*Tom Williams*