

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BUREAU OF ENVIRONMENTAL HEALTH SERVICES FOOD ESTABLISHMENT INSPECTION REPORT

TIME IN	TIME OUT
DATE	PAGE 1 of

NEXT RO	JUTINE	INSPEC	CTION, OR SUCH SHORTER P	ERIOD OF TIME AS N	MAY BE	SPEC	IFIED	IN WRI	TING BY 1	THE REC	SULA	LITIES WHICH MUST BE CORR TORY AUTHORITY. FAILURE T			
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THE ESTABLISHMENT NAME: OW			OWNER:							U OF	PERSON IN CHARGE:				
ADDRESS:					ESTABLISHMENT NU					NUMBE	ER:	COUNTY:			
CITY/ZIP:			PHONE:	PHONE:			FAX:				P.H. PRIORITY: H	М	L		
ESTABLISHMENT TYPE BAKERY C. STORE CATERER RESTAURANT SCHOOL SENIOR CENTE					DELI GROCERY STORE							INSTITUTION MOBILE VENDORS TEMP.FOOD			
PURPOS Pr	SE re-openi	ng	Routine Follow-up	Complaint	Oth	er									
FROZEN DESSERT Approved Disapproved Not Applicable			SEWAGE DISPOS PUBL	JBLIC COMMUNITY NO						NON-COMMUNITY PRIVATE Date Sampled Results					
	License	No		PRIVA RISK FAC		AND	INITE	ר אר או	TIONS	Date	Jan	Nesui			
Dick for	ctore or	o food n	reparation practices and employ							oaso Co	ntrol	and Prevention as contributing fa	ctore in		
foodbor	rne illnes		eaks. Public health intervention	ns are control measur	es to pre	vent f	oodbor	ne illne	ss or injury						
Compliar	nce		Demonstration of l		3 -			Compliance				otentially Hazardous Foods king, time and temperature	С	OS R	
IN OL	JT		and performs duties	<u>.</u>				IN OUT N/O N/A		· ·					
IN OI	LIT		Employee H Management awareness; police				IN IN		N/O N/A	eating procedures for hot holding ing time and temperatures					
IN OL			Proper use of reporting, restrict				_		N/O N/A			holding temperatures			
111 01	JT N/O		Good Hygienic F					OUT	N/A			holding temperatures			
			Proper eating, tasting, drinking No discharge from eyes, nose						N/O N/A			marking and disposition bublic health control (procedures /		-	
IN O	UT N/C)					IN	OUT	N/O N/A	record		· ·			
IN O	UT N/O	1	Preventing Contamina Hands clean and properly was				IN	OUT	N/A Consumer undercook			Consumer Advisory advisory provided for raw or			
IN OL	UT N/C)	No bare hand contact with rea	dy-to-eat foods or			1					ghly Susceptible Populations			
	approved alternate method prope					I	IN OUT NO NUA Pasteuri			ırized	I foods used, prohibited foods not				
accessible					IN	IN OUT N/O N/A offered			· •						
IN OUT Food obtained from approved so					IN	OUT	N/A	Food a	additi	Chemical ves: approved and properly used					
IN OUT N/O N/A Food received at proper temporal					IN OUT			Toxic substances properly identified, stored and used			and				
IN OU	. coa in good containen, care a								Compliance with Approved Procedures						
IN OL	IN OUT N/O N/A Required records available: shells destruction		elistock tags, parasite	asite			IN OUT N/A		Compliance with approved Specialized Process and HACCP plan						
			Protection from Co				┨								
IN OL	JT	N/A	Food separated and protected				The letter to the left of each item inspection.			f each it	em in	dicates that item's status at the til	me of the	!	
IN O	UT	N/A	Food-contact surfaces cleaned				IN = in compliance				OUT = not in compliance N/O = not observed				
IN O	UT N/C)	Proper disposition of returned, reconditioned, and unsafe food				N/A = not applicable COS=Corrected On Si				te	R=Repeat Item			
					OOD RE	TAIL	PRACT	TICES							
INI	OUT		Good Retail Practices are preve		ontrol the	e introd R		of path	ogens, ch	emicals,			COS	\	
IIN	IN OUT		Safe Food and Waterized eggs used where required		000	1	IN	001	In-use u	Proper Use of Utensils te utensils: properly stored			COS	S R	
			and ice from approved source						Utensils	, equipn		and linens: properly stored, dried,			
			Food Temperature Co	ntrol			-		handled Single-u		e-ser	vice articles: properly stored, use	d		
			ate equipment for temperature of							used pro	perly				
			ved thawing methods used cometers provided and accurate				-		Food an			Equipment and Vending ntact surfaces cleanable, properly	,		
		11101111	·						designe	d, const	ructe	d, and used	<i>'</i>		
		Food Identification							strips us	sed		s: installed, maintained, used; tes	t		
	Food properly labeled; original container Prevention of Food Contamina Insects, rodents, and animals not present Contamination prevented during food prepand display					-		Nonfood-contact su							
						1		Hot and	Physical Facilities lot and cold water available; adequate pressure lumbing installed; proper backflow devices						
Personal cleanliness: clean outer clothing, t fingernails and jewelry Wiping cloths: properly used and stored		ing, hair restraint,					Sewage	ge and wastewater properly disposed							
		d			1		Toilet fa	t facilities: properly cor		rly constructed, supplied, cleaned					
			and vegetables washed before t						Garbage	e/refuse	prope	erly disposed; facilities maintained	t		
Darit	n in O'	ores /T	itle: 0				1		Physica	I facilitie		alled, maintained, and clean			
reisor	n in Ch	arge / I	W Jan Mr								Dat	ᠸ.			
Inspec	ctor	Idan J	FEL Jayor Bran	dy		Те	lepho	ne No.	EPH	S No.		ow-up: Yes ow-up Date:		No	



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BUREAU OF ENVIRONMENTAL HEALTH SERVICES FOOD ESTABLISHMENT INSPECTION REPORT

PAGE 2 of

ESTABLISHMEN	T NAME	ADDRESS		CITY/ZIF)		
FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUC	ION	TEMP. ir	ı°F	
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIORITY elimination, prevention or reduction /E IMMEDIATE ACTION within 7	ITEMS on to an acceptable level, hazards 2 hours or as stated.	s associated	d with foodborne illness	Correct by (date)	Initial
							100
							100
							100
							0 0
Code		CORE IT	EMS			Correct by	Initial
Reference	Core items relate to general sanitation standard operating procedures (SSOF	, operational controls, facilities or	structures, equipment design, ger	neral maint	enance or sanitation	(date)	IIIII
	-						JM
							00
							100
							1.00
							J 6
							J~
							100
							100
							100
							06
		EDUCATION PROV	IDED OR COMMENTS				
Person in Ch	narge /Title: June Wy				Date:		
Inspector:		lgBnadrz	Telephone No.	PHS No.	Follow-up:	Yes	No
MO 580-1814 (9-13)	I how how	DISTRIBUTION: WHITE - OWNER'S CO			Follow-up Date:		F6 37Δ



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BUREAU OF ENVIRONMENTAL HEALTH SERVICES FOOD ESTABLISHMENT INSPECTION REPORT

ESTABLISHMEN	IT NAME	ADDRESS		CITY/ZI	CITY /ZIP			
FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODU	JCT/ LOCAT	TON	TEMP. ir	n ° F	
Code		PRIORITY I	TEMS			Correct by	Initial	
Reference	Priority items contribute directly to the or injury. These items MUST RECEIVED	ve immediate, prevention or reduction of reduction versions of the version of reduction versions of the version of reduction versions of the version of reduction versions of reduction versions of the version of reduction versions versions of reduction versions of reduction versions version versions versions version versions version versions version versi	n to an acceptable level, naza 2 hours or as stated.	ards associate	d with foodborne iliness	(date)		
Code Reference	Core items relate to general sanitation	CORE ITE	EMS structures, equipment design.	general maint	enance or sanitation	Correct by (date)	Initial	
	standard operating procedures (SSOI	Ps). These items are to be correct	cted by the next regular insp	pection or as	stated.	(1711)	1 -	
							100	
							100	
							J~	
							100	
							100	
							, .	
							100	
		EDUCATION PROV	IDED OR COMMENTS					
Person in Cl	narge /Title:				Date:			
Inspector:		191Brady	Telephone No.	EPHS No.	Follow-up:	Yes	No	
MO 500 4044 /6 12	, , ,	DIOTOID CHAN WHITE OVER THE OWNER OF THE OWNER OW	DV CANADY 5"5	L CONT	Follow-up Date:		E0.07:	

MO 580-1814 (9-13)