

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 ROUT	TINE I	NSPEC	TION THIS DAY, THE ITEMS NO CTION, OR SUCH SHORTER P FOR CORRECTIONS SPECIF	ERIOD OF TIME AS N	/AY BE	SPEC	IFIED	IN WRI	TING BY 1	HE REG	ULA	TORY AUTHORITY. FA			
				OWNER:						5 0.	PERSON IN CHARGE:				
ADDRESS:						ESTABLISHMENT NUMBER				R:	COUNTY:				
				PHONE:	DNE: FAX:					P.H. PRIORITY :	Н	М	L		
ESTABLISHI BAKE REST	ERY		C. STORE CATER SCHOOL SENIO		LI MMER F	.P.		GROCE AVERN	RY STOR	ιE		STITUTION MP.FOOD	MOBILE V	'ENDOR	.S
PURPOSE Pre-o	penin	g	Routine Follow-up	Complaint	Oth	er									
FROZEN DESSERT Approved Disapproved Not Applicable				PUBLIC COMMUNITY NON-C					DMMUNITY PRIVATE						
Lic	ense	No	<u> </u>	PRIVA RISK FAC		AND	INITE	D\/ENI	TIONS	Bato		prod	rtocalto		
Pick factor	re are	food n	reparation practices and employ							-2250 CO	ntrol	and Prevention as contri	huting fact	ore in	
foodborne i			aks. Public health interventio	ns are control measur	es to pre	vent fo	oodbor	ne illne	ss or injury						
Compliance			Demonstration of I		cos	R	1	mpliance		Proper		otentially Hazardous Foo king, time and temperatur		СО	S R
IN OUT			and performs duties						N/O N/A			oking, time and temperature			
IN OUT			Employee H Management awareness; police			-			N/O N/A			eating procedures for hot ing time and temperature			
IN OUT			Proper use of reporting, restrict	tion and exclusion								holding temperatures			
IN OUT	N/O		Good Hygienic F Proper eating, tasting, drinking					OUT	N/A			d holding temperatures			
IN OUT			No discharge from eyes, nose					OUT OUT	Time as a			e marking and disposition public health control (procedures /			
114 001	14/0		Preventing Contamina	tion by Hands		-	IIN	001	IN/O IN/A	records	s)	Consumer Advisory			
IN OUT	Hands clean and properly wash					IN	OUT	N/A Consume			advisory provided for raw or				
IN OUT	IN OUT N/O No bare hand contact with ready approved alternate method prop											phly Susceptible Populati	ions		
IN OUT Adequate handwashing facilities accessible					IN	IN OUT N/O N/A Pasteurize			foods used, prohibited fo	oods not					
	Approved Sou									Chemical					
		N/A	Food obtained from approved source Food received at proper temperature								tives: approved and properly used stances properly identified, stored and				
IN OUT Food in good co		Food in good condition, safe a			-	Co			nforn	ormance with Approved Procedures					
IN OUT	IN OUT N/O N/A Required records available: sh		ellstock tags, parasite							nce with approved Specialized Process CCP plan					
			Protection from Co									•		•	•
IN OUT	1.01						 The letter to the left of each item inspection. 			m in	indicates that item's status at the time of the				
IN OUT N/A Food-contact surfaces cleaned 8						IN = in compliance OUT = not in complia					e				
IN OUT	IN OUT N/O Proper disposition of returned, proper disposition					N/A = not applicable COS=Corrected On Site			е	N/O = not observed R=Repeat Item					
			Toomanionea, and anodio 1000		OOD RE	TAIL	PRACT					·			
111 01			Good Retail Practices are preven				duction		nogens, ch				ds.		
IN O	IN OUT		Safe Food and Wat urized eggs used where required		cos	R	IIN	OUT	In-use u	Proper Use of Utensils ise utensils: properly stored nsils, equipment and linens: properly stored, dried dled			cos	R	
			and ice from approved source									d, dried,			
		Adagu	Food Temperature Co ate equipment for temperature of	ntrol					Single-use/single-se			vice articles: properly sto	red, used		
			ved thawing methods used	CONTROL			-		Gloves	Food and nonfood-cor		Equipment and Vending			
			ometers provided and accurate									ntact surfaces cleanable	, properly		
			Food Identification						designed, constructed, a Warewashing facilities: ii				used; test		
		Food p	properly labeled; original contain	er			-		strips used Nonfood-contact su		surfa	aces clean			
			Prevention of Food Contain									ysical Facilities			
			s, rodents, and animals not pres mination prevented during food				-					railable; adequate pressu oper backflow devices	ıre	-	+
		and dis	splay	, ,								<u> </u>			
		fingerr	nal cleanliness: clean outer cloth nails and jewelry						ŭ			iter properly disposed			
	Wiping cloths: properly used and stored Fruits and vegetables washed before use						-					rly constructed, supplied, erly disposed; facilities m			
				<u>.</u>					Physica	I facilities	inst	alled, maintained, and cle	ean		1
Person in	n Cha	rge /T	itle: Nam	101							Date				
Inspector	T: /	14	bille: Leis Nag			Те	lepho	ne No.	EPH			ow-up:	Yes	ı	No



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FOOD ESTABLISHMENT INSPECTION REPORT

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ESTABLISHMEN	T NAME	ADDRESS		CITY/ZII	CITY /ZIP			
EO	OD PRODUCT/LOCATION	TEMP : 0.E	FOOD PRODU	ICT/ LOCAT	TON	TEMP. in ° F		
100	DD FRODUCT/LOCATION	TEMP. in ° F	ICI/ LOCAT	ION	TEMP. In F			
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIORITY IT elimination, prevention or reduction /E IMMEDIATE ACTION within 72 I	EMS to an acceptable level, haza hours or as stated.	rds associate	d with foodborne illness	Correct by (date)	Initial	
Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	CORE ITEM 1, operational controls, facilities or str 2s). These items are to be corrected.	ructures, equipment design,	general maint	enance or sanitation	Correct by (date)	Initial	
							ス.Y. ス.Y.	
		EDUCATION PROVID	DED OR COMMENTS					
Person in Ch	- / . WI				Date:			
Inspector:	Jayo Brady		Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No	
MO 580-1814 (9-13)	7	DISTRIBUTION: WHITE - OWNER'S COPY	CANARY – FILE C	OPY			E6.37A	