

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 ROUTINE INSPEC		ERIOD OF TIME AS MA	AY BE SPEC	CIFIED I	N WRIT	ING BY T	HE REGUL	CILITIES WHICH MUST BE CORRE ATORY AUTHORITY. FAILURE TO OPERATIONS.		
ESTABLISHMENT N	OWNER:						PERSON IN CHARGE:			
ADDRESS:				ESTABLISHMENT NUMBER			NUMBER:	COUNTY:		
CITY/ZIP:	PHONE:	PHONE:					P.H. PRIORITY : H	М	L	
ESTABLISHMENT TYPE BAKERY RESTAURANT	C. STORE CATER SCHOOL SENIOF		l Mer F.P.		GROCEI	RY STOR		INSTITUTION MOBILE V FEMP.FOOD	'ENDOR	S
PURPOSE Pre-opening	Routine Follow-up	Complaint	Other							
FROZEN DESSERT Approved Disapproved Not Applicable License No. PRIV/			C COMMUNITY NON-CO					MMUNITY PRIVATE mpled Results		
		RISK FAC	TORS AND	D INTE	RVENT	IONS				
	reparation practices and employ eaks. Public health intervention							ol and Prevention as contributing fact	ors in	
Compliance	Demonstration of k				mpliance			Potentially Hazardous Foods	CO	S R
IN OUT	Person in charge present, dem and performs duties	onstrates knowledge,		IN (N TUC	I/O N/A	Proper co	oking, time and temperature		
	Employee He			IN (I/O N/A		heating procedures for hot holding		
IN OUT IN OUT	Management awareness; polic Proper use of reporting, restrict		$\left \right $		IN OUT N/O N/A IN OUT N/O N/A			Proper cooling time and temperatures Proper hot holding temperatures		
	Good Hygienic P	Practices		IN	IN OUT N/A Prope		Proper co	Id holding temperatures		
IN OUT N/O	Proper eating, tasting, drinking No discharge from eyes, nose					<u>N/O N/A</u>		te marking and disposition public health control (procedures /		
IN OUT IN/O				IN (JUIN	N/O N/A	records)	Consumer Advisory	_	_
IN OUT N/O	Preventing Contamination by Hands Hands clean and properly washed			IN				umer advisory provided for raw or		
IN OUT N/O	No bare hand contact with read approved alternate method pro					undercooked food Highly Susceptible Populations				
IN OUT	Adequate handwashing facilitie accessible			IN OUT N		N/O N/A	Pasteurized foods used, prohibited foods not offered			
	Approved So	urce					olicica	Chemical		
IN OUT	Food obtained from approved source N/A Food received at proper temperature			IN OUT N/A		Food additives: approved and properly used Toxic substances properly identified, stored and				
IN OUT N/O N/A				IN	OUT		used	•••	u	
IN OUT	Food in good condition, safe an Required records available: she				<u></u>			ormance with Approved Procedures ce with approved Specialized Proces	\$	
IN OUT N/O N/A	destruction Protection from Cor	0,11		IN	OUT	N/A	and HAC		-	
IN OUT N/A	Food separated and protected	itamination		The	letter to	the left o	f each item	indicates that item's status at the time	e of the	
IN OUT N/A	Food-contact surfaces cleaned & sanitized			inspection. IN = in compliance				OUT = not in compliance		
IN OUT NO Proper disposition of returned, previously served,				N/A = not applicable N/O =				N/O = not observed		
	reconditioned, and unsafe food		OD RETAIL	PRACT		=Correcte	ed On Site	R=Repeat Item		
	Good Retail Practices are preve					ogens, ch	emicals, an	d physical objects into foods.		
IN OUT	Safe Food and Wate		COS R	IN	OUT			oper Use of Utensils	COS	R
	urized eggs used where required and ice from approved source							perly stored t and linens: properly stored, dried,		
	Food Temperature Control				handled			ervice articles: properly stored, used		-
Adequ						used proper	ly			
Approved thawing methods used Thermometers provided and accurate				_		Food an	Utensils			
	•					designe	d, construct	contact surfaces cleanable, properly ed, and used ies: installed, maintained, used; test		
Food Identification						Warewa strips us				
Food properly labeled; original container						Nonfood	l-contact su			
Prevention of Food Contamination Insects, rodents, and animals not present					Physical Facilities Hot and cold water available; adequate pressure					
Contamination prevented during food preparation, storage and display								proper backflow devices		
Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry					Sewage and wastewater properly disposed					
Wiping	Wiping cloths: properly used and stored					Toilet facilities: properly constructed, supplied, cleaned				1
Fruits and vegetables washed before use								perly disposed; facilities maintained stalled, maintained, and clean		
Person in Charge /T	itle: Marine n	- 00				,		ate:		
Inspector:	itte: Marine of MylorBrady	ome	<u> </u>	elephor	ne No	FDH	S No. Fo	ollow-up: Yes		No
Mamitz	Monthady	/	[''					bllow-up Date:		
MO 580-1814 (9-13)		DISTRIBUTION: WHITE -	OWNER'S COF	Pγ	(CANARY - FI		•		E6.37



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	OOD ESTABLISHMENT IN		PAGE ² of				
ESTABLISHMEN	TNAME	ADDRESS		CITY /ZIF			
FO	OD PRODUCT/LOCATION	TEMP. in ° F	TEMP. in ° F FOOD PRODUCT/ L0			TEMP. in ° F	
Code		PRIORITY IT	EMS			Correct by	Initial
Reference	Priority items contribute directly to the or injury. These items MUST RECEI	e elimination, prevention or reduction VE IMMEDIATE ACTION within 72	to an acceptable level, hazal hours or as stated.	rds associated	d with foodborne illness	(date)	
Code Reference	Core items relate to general sanitatio standard operating procedures (SSO	CORE ITE n, operational controls, facilities or st Ps). These items are to be correct	ructures, equipment design, o	general maint	enance or sanitation stated.	Correct by (date)	Initial
							MLJ
							ML5
							ML5
							ML5
							MLJ
		EDUCATION PROVI	DED OR COMMENTS				
Dan 1 Ci					Deter		
Person in Ch	arge/Title: Marine J.L. Marine	forma	· · · · · · · · · · · · · · · · · · ·		Date:		
Inspector:	FZ:1 JoyloiBia	dy	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No
MO 580-1814 (9-13)	v /	DISTRIBUTION: WHITE - OWNER'S COP	Y CANARY – FILE CO	JPY			E6.37A