

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 INSPECTION	ON, OR SUCH SHORTER PER	RIOD OF TIME AS M	AY BE S	SPECI	IFIED I	N WRI	TING BY T	HE REGUL	CILITIES WHICH MUST BE CORRECT ATORY AUTHORITY. FAILURE TO		
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED ESTABLISHMENT NAME:		OWNER:			IN CESSATION OF YOUR FOOD OF				PERATIONS. PERSON IN CHARGE:		
ADDRESS:				ESTABLISHMENT NUMBER:				COUNTY:			
CITY/ZIP:	PHONE:			FAX:				P.H. PRIORITY : H	М	L	
ESTABLISHMENT TYPE BAKERY RESTAURANT	C. STORE CATERE SCHOOL SENIOR		_I IMER F	.P.		GROCE	RY STOR		NSTITUTION MOBILE VI EMP.FOOD	ENDOR	S
PURPOSE Pre-opening	Routine Follow-up	Complaint	Othe	er							
FROZEN DESSERT Approved Disappr		SEWAGE DISPOS PUBLI PRIVA	с			UPPL 1UNIT			MMUNITY PRIVATE		
License No		RISK FAC		AND	INTE	RVEN ⁻	TIONS				
		e behaviors most con	nmonly r	eporte	ed to th	ne Cent	ers for Dis		ol and Prevention as contributing facto	rs in	
foodborne illness outbreaks Compliance	s. Public health interventions Demonstration of Kn		s to prev			ne illne:			Potentially Hazardous Foods	COS	S R
Pe	erson in charge present, demo nd performs duties		000		1	· ·	N/O N/A		bking, time and temperature		
	Employee Hea				_		N/O N/A		heating procedures for hot holding		
	anagement awareness; policy roper use of reporting, restriction				_		N/O N/A N/O N/A		oling time and temperatures t holding temperatures		
	Good Hygienic Pra	actices			IN	OUT	N/A	Proper col	d holding temperatures		
	roper eating, tasting, drinking o o discharge from eyes, nose a			-					te marking and disposition public health control (procedures /		
	Preventing Contamination	on by Hande	_		IN	001	N/O N/A	records)	Consumer Advisory	_	
IN OUT N/O Hands clean and properly washed					IN	OUT	N/A		advisory provided for raw or		
IN OUT N/O No bare hand contact with ready-t approved alternate method proper						underco		undercook H	lighly Susceptible Populations		
IN OUT Adequate handwashing facilities s								ed foods used, prohibited foods not			
ac	ccessible Approved Sou	rce			-			offered	Chemical		
E.	ood obtained from approved so				IN	OUT	N/A		tives: approved and properly used		
IN OUT N/O N/A Food received at proper temperatu		ature			IN OUT I OXIC used			stances properly identified, stored and			
	ood in good condition, safe and equired records available: shel								rmance with Approved Procedures ce with approved Specialized Process		
	estruction				IN	OUT	N/A	and HACC			
	Protection from Conta ood separated and protected	amination		_	The	lattar t	the left o	f each item i	ndicates that item's status at the time	of the	
IN OUT N/A Food separated and protected IN OUT N/A Food-contact surfaces cleaned & s		sanitized		inspection.							
IN OUT N/O Proper disposition of returned, prev reconditioned, and unsafe food		reviously served,	IN = in compliance N/A = not applicable COS=Corrected On Site			= not appl	icable	OUT = not in compliance N/O = not observed R=Repeat Item			
	conditioned, and unsale lood	GC	DOD RE	TAIL F	PRACT						
	od Retail Practices are prevent				-		logens, ch				
IN OUT Pasteurize	Safe Food and Water ed eggs used where required		COS	R	IN	OUT	In-use u	Pro tensils: prop	per Use of Utensils	COS	R
	d ice from approved source						Utensils handled		and linens: properly stored, dried,		
	Food Temperature Cont	rol							ervice articles: properly stored, used		
	equipment for temperature co	ntrol					Gloves	used properl			
Approved thawing methods used Thermometers provided and accurate							Food an	Utensils, Equipment and Vending and nonfood-contact surfaces cleanable, properly			
- Food Identification								signed, constructed, and used			
Food Identification							strips us				
Food properly labeled; original container Prevention of Food Contaminati							Nonfood	l-contact sur	faces clean Physical Facilities		
Insects, rodents, and animals not present							Hot and		available; adequate pressure		
Contamination prevented during food prepa and display		eparation, storage					Plumbin	g installed; p	proper backflow devices		
Personal cleanliness: clean outer clothing, ha		g, hair restraint,					Sewage	and wastew	vater properly disposed		1
fingernails and jewelry Wiping cloths: properly used and stored							Toilet fa	cilities: prop	erly constructed, supplied, cleaned		1
Fruits and vegetables washed before use		e			1		Garbage	e/refuse prop	perly disposed; facilities maintained		1
Person in Charge /Title	\wedge				1		Physica		stalled, maintained, and clean ite:		
	, thomas we	WY -						_			
Inspector:	n Bradur	0		Te	lepho	ne No.		Fo	llow-up: Yes llow-up Date:	Ν	٩o
MO 580-1814 (9-13)		DISTRIBUTION: WHITE	- OWNER'	S COPY	/		CANARY - F	LE COPY			E6.37



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FC	DOD ESTABLISHMENT IN	PAGE 2 of	PAGE ² of			
ESTABLISHMENT	NAME	ADDRESS		CITY /ZIP		
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ I	OCATION	TEMP. in ° F	
Code		PRIORITY II	EMS		Correct by	Initial
Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	elimination, prevention or reduction	to an acceptable level, hazards as hours or as stated.	sociated with foodborne illness	(date)	
Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	n, operational controls, facilities or st	MS tructures, equipment design, gener	al maintenance or sanitation	Correct by (date)	Initial
	standard operating procedures (550)		ieu by the next regular inspectio	i or as stated.		
		FDUCATION PROVI	DED OR COMMENTS			
Demon 1 Cl				Detai		
Person in Ch	arge /Title: Hyperoba	clleg		Date:		
Inspector:	Nausta Bradus			IS No. Follow-up: Follow-up Date:	Yes	No
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