

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	CTION, OR SUCH SHORTER PE	RIOD OF TIME AS MA	AY BE SPE	CIFIED	N WRIT	ING BY T	HE REGU	ACILITIES WHICH MUST BE CORRECT JLATORY AUTHORITY. FAILURE TO		
ESTABLISHMENT N	OWNER:	OWNER:			N OF YO		PERSON IN CHARGE:			
ADDRESS:		EST	ABLISH	HMENT	NUMBEF	COUNTY:				
CITY/ZIP:	PHONE:	PHONE:					P.H. PRIORITY : H	М	L	
ESTABLISHMENT TYPE BAKERY RESTAURANT	C. STORE CATERE SCHOOL SENIOR		l MER F.P.		GROCE	RY STOR		INSTITUTION MOBILE V TEMP.FOOD	ENDOR	S
PURPOSE Pre-opening	Routine Follow-up	Complaint	Other _							
FROZEN DESSERT Approved Disa	SEWAGE DISPOSA PUBLIC PRIVAT					OMMUNITY PRIVATE ampled Results				
License No.		RISK FACT		D INTE	RVENT	IONS				
Risk factors are food p	reparation practices and employe	e behaviors most com	monly repo	orted to th	ne Cente	ers for Dis	ease Cont	trol and Prevention as contributing factor	rs in	
foodborne illness outbre Compliance	eaks. Public health interventions				ne Illnes mpliance		/.	Potentially Hazardous Foods	CO	S R
IN OUT	Person in charge present, demo and performs duties	nstrates knowledge,		IN	OUT N	I/O N/A	Proper o	cooking, time and temperature		
	Employee Hea					1/0 N/A		reheating procedures for hot holding		
IN OUT IN OUT	Management awareness; policy Proper use of reporting, restriction							Proper cooling time and temperatures Proper hot holding temperatures		
IN OUT N/O	Good Hygienic Pr	actices		IN	OUT	N/A	Proper c	cold holding temperatures		
IN OUT N/O	Proper eating, tasting, drinking of No discharge from eyes, nose a				<u>1 TUO</u>	<u>N/O N/A</u> N/O N/A		late marking and disposition a public health control (procedures /		
	Preventing Contaminati	on by Hands		IIN		N/O N/A	records)	Consumer Advisory		
IN OUT N/O	Preventing Contamination by Ha N/O Hands clean and properly washed			IN	OUT	N/A		er advisory provided for raw or oked food		
IN OUT N/O No bare hand contact with ready-t								Highly Susceptible Populations		
IN OUT	N OUT Adequate handwashing facilities su accessible			IN			Pasteuri offered	zed foods used, prohibited foods not		
	Approved Sou							Chemical		
IN OUT					Te			ditives: approved and properly used bstances properly identified, stored and		
	OUT N/O N/A Food received at proper temperature			IN			used			
IN OUT	Food in good condition, safe and Required records available: she							Conformance with Approved Procedures Compliance with approved Specialized Process		
IN OUT N/O N/A	destruction Protection from Contamination			IN			and HACCP plan			
IN OUT N/A	Food separated and protected	anniation				the left o	f each iten	n indicates that item's status at the time	of the	
IN OUT N/A	Food-contact surfaces cleaned & sanitized			IN = in compliance OUT = not in compliance						
IN OUT N/O Proper disposition of returned, previously reconditioned, and unsafe food				N/A = not applicable COS=Corrected On Site				N/O = not observed R=Repeat Item		
	reconditioned, and unsale lood		OD RETAI	L PRACI		00110010				
	Good Retail Practices are preven					ogens, ch	,			
IN OUT Paster	Safe Food and Water urized eggs used where required		COS R	IN	OUT	In-use u		Proper Use of Utensils operly stored	COS	R
	Water and ice from approved source				Utensi		, equipme	nt and linens: properly stored, dried,		
	Food Temperature Contro			_	handled Single-use			se/single-service articles: properly stored, used		
	Adequate equipment for temperature contr						used prope	erly		
Approv					Food an	Utensils, Equipment and Vending ood and nonfood-contact surfaces cleanable, prop				
	Food Identification					designe	d, construe	cted, and used		
					strips us					
Food p	r ination				Nontood	ood-contact surfaces clean Physical Facilities				
Insect	nt					and cold water available; adequate pressure				
Contai and di	eparation, storage					lumbing installed; proper backflow devices				
Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry						Sewage and wastewater properly disposed				1
Wiping						ilet facilities: properly constructed, supplied, cleaned				
Fruits and vegetables washed before use						Garbage/refuse properly disposed; facilities maintained Physical facilities installed, maintained, and clean			<u> </u>	
Person in Charge /T	itle: _{Desk} Approval – em	ailed to manase	r		<u> </u>	FIIYSICA		Date:	<u> </u>	_
Inspector:	Resp XMulex		ר	Telepho	ne No.	PHE		Follow-up: Yes	1	No
MO 580-1814 (9-13)		DISTRIBUTION: WHITE -	OWNER'S CO	IPY		CANARY – FI		Follow-up Date:		E6.37



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ABCCEN	DOD ESTABLISHMENT IN		PAGE ² of				
ESTABLISHMEN	「 NAME	ADDRESS					
FOOD PRODUCT/LOCATION		TEMP. in ° F	TEMP. in ° F FOOD PRODUCT/			TEMP. in ° F	
Code		PRIORITY II	TEMS			Correct by	Initial
Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	e elimination, prevention or reduction	to an acceptable level, haza hours or as stated.	rds associated	d with foodborne illness	(date)	
Code Reference	Core items relate to general sanitation	CORE ITE	MS tructures, equipment design, (general mainte	enance or sanitation	Correct by (date)	Initial
	standard operating procedures (SSOI	Ps). These items are to be correct	ted by the next regular insp	ection or as	stated.		
		EDUCATION PROVI	DED OR COMMENTS				
Person in Ch	arge /Title: Desk Approval -	and cilled to manage			Date:		
Inspector:	- Lesse xyproval - 7 Ann 1	umanue co manager	Telephone No.	PHES No.	Follow-up:	Yes	No
MO 580-1814 (9-13)	feint XII MIPS	DISTRIBUTION: WHITE - OWNER'S COP			Follow-up Date:		E6.37A