

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	TION THIS DAY, THE ITEMS NO CTION, OR SUCH SHORTER PE	ERIOD OF TIME AS MA	AY BE SPEC	CIFIED I	N WRI	TING BY 1	THE REG	GULAT	ORY AUTHORITY. I			
ESTABLISHMENT	OWNER:	D IN THIS NOTICE MAY RESULT IN CESSATION OF OWNER:						PERSON IN CHARGE:				
ADDRESS:		<u> </u>			HMENT	NUMBE	R:	COUNTY:				
CITY/ZIP:		PHONE:	PHONE:		FAX:				P.H. PRIORITY :	Н	М	L
ESTABLISHMENT TYPE BAKERY RESTAURANT	C. STORE CATER SCHOOL SENIOF		l MER F.P.		GROCE	RY STOR	RE		TITUTION IP.FOOD	MOBILE	VENDC	RS
PURPOSE Pre-opening	Routine Follow-up	Complaint	Other									
FROZEN DESSERT Approved Disa License No.		PUBLIC COMMUNITY NO				N-COMMUNITY PRIVATE te Sampled Results						
		RISK FAC	TORS AND) INTEI	RVEN	TIONS						
	preparation practices and employ eaks. Public health intervention							ntrol a	nd Prevention as cor	ntributing fa	ctors in	
Compliance	Demonstration of k				mpliance	, ,	y.	Pot	entially Hazardous F	oods	C	COS R
IN OUT	Person in charge present, dem and performs duties	onstrates knowledge,		IN (I TUO	N/O N/A	Proper	cookir	ng, time and tempera	iture		
	Employee He	alth		IN (I TUC	N/O N/A	Proper	rehea	ating procedures for h	hot holding		
IN OUT	Management awareness; polic			IN (N/O N/A			g time and temperati	ures		
IN OUT	Proper use of reporting, restrict Good Hygienic P				OUT OUT	<u>N/O N/A</u> N/A			olding temperatures			
IN OUT N/O	Proper eating, tasting, drinking	or tobacco use				N/O N/A	Proper	date n	narking and dispositi	on		
IN OUT N/O	No discharge from eyes, nose	and mouth		IN	OUT I	N/O N/A	Time as records		blic health control (pr	rocedures /		
	Preventing Contamina								Consumer Advisory			
IN OUT N/O	Hands clean and properly wash	ned		IN	OUT	N/A	Consur underc		visory provided for ra	aw or		
IN OUT N/O	No bare hand contact with read						underer		ly Susceptible Popul	ations		
IN OUT	approved alternate method pro Adequate handwashing facilitie						Pasteu	urized for	oods used, prohibited	d foods not		
	accessible			IN 0		N/O N/A	offered				_	
IN OUT	Approved So Food obtained from approved s			IN	OUT	N/A	Food a	additive	Chemical s: approved and pro	nerly used		
IN OUT N/O N/A	Food received at proper tempe				OUT	1071	Toxic s		nces properly identifie		ind	
IN OUT	Food in good condition, safe ar	nd unadulterated					used	onforma	ance with Approved F	Procedures	_	
	Required records available: she			INI	OUT	N/A	Compli	iance v	vith approved Specia			
IN OUT N/O N/A	destruction Protection from Cor	tomination		IIN	001	N/A	and HA	ACCP p	olan			
IN OUT N/A	Food separated and protected	Itamination		The	letter to	o the left o	f each ite	em indi	cates that item's stat	us at the tir	ne of the	•
IN OUT N/A				inspection.								-
Proper disposition of returned previously s				IN = in compliance N/A = not applicable					OUT = not in compliance N/O = not observed			
IN OUT N/O	reconditioned, and unsafe food					S=Correcte			R=Repeat Item			
			OD RETAIL									
IN OUT	Good Retail Practices are preven Safe Food and Wate		COS R	IN	of path OUT	ogens, ch			rysical objects into fo Use of Utensils	ods.	COS	S R
	urized eggs used where required	<i>n</i>	000 11		001	In-use u	itensils: p				000	
	and ice from approved source					Utensils	, equipm		d linens: properly sto	ored, dried,		
	Food Temperature Cor	ntrol		_		handled Single-		-servi	ce articles: properly s	stored user	1	
Adequ	uate equipment for temperature c						used prop		ce anticles. property a		4	
Approved thawing methods used Thermometers provided and accurate Food Identification							Utensils, Equipment and Vending					
				1					act surfaces cleanab and used	ole, properly	/	
						Warewa	vashing facilities: installed, maintained, used; test			t		
Food	er		-		strips us Nonfood					_		
Prevention of Food Contamination					Physical Facilities							
Insects, rodents, and animals not present Contamination prevented during food prepa				_			nd cold water available; adequate pressure					_
and di		sionage					iy installe	sa, pro				
Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry Wiping cloths: properly used and stored							and was	and wastewater properly disposed				
							roperly	erly constructed, supplied, cleaned				
Fruits and vegetables washed before use						Garbage/refuse properly di			y disposed; facilities	maintained		
Person in Charge /T	itle:	<i>u</i> = 0 <i>"</i>	<u> </u>			Physica		s install Date:	led, maintained, and	clean		
	i tle : _{Sent} via email - asmal	nKenയgmail.com										
Inspector:	Power May ker		Te	elephoi	ne No.	PHE		Follo	w-up: w-up Date:	Yes		No
MO 580-1814 (9-13)		DISTRIBUTION: WHITE -	OWNER'S COP	Y		CANARY – F			a-up Dale.			E6.37



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Marces	DOD ESTABLISHMENT IN		PAGE ² of				
ESTABLISHMEN	ΓNAME	ADDRESS	CITY /ZIF)			
FOOD PRODUCT/LOCATION		TEMP. in ° F	CT/ LOCAT	ION	TEMP. in ° F		
		-					
Code		PRIORITY IT				Correct by	Initial
Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	elimination, prevention or reduction	to an acceptable level, hazard hours or as stated.	ds associated	d with foodborne illness	Correct by (date)	Initial
	, , , ,						
Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	n, operational controls, facilities or st	ructures, equipment design, a	eneral mainte	enance or sanitation	Correct by (date)	Initial
	standard operating procedures (330)		eu by the next regular inspe				
		EDUCATION PROVID	DED OR COMMENTS				
Person in Ch	arge /Title:				Date:		
		nahnKen@gmail.com	Tolophore No.	PHES No.	Follow-up:	Yes	No
Inspector: MO 580-1814 (9-13)	Jan XMarkov	DISTRIBUTION: WHITE - OWNER'S COPY			Follow-up: Follow-up Date:	162	E6.37A