

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, OR SUCH SHORTER PERIOD OF TIME AS IN WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE ESTABLISHMENT NAME: OWNER:												COMPL	Y	
ADDRESS:					ESTABLISHMENT NUMBER:				ER:	COUNTY:				
CITY/ZIP:			PHONE:			FAX:					P.H. PRIORITY :	Н	М	L
			ELI JMMER F.P.		GROCERY STOR			I RE INSTITUTION MOBILE TEMP.FOOD		MOBILE V	ENDOR	S		
PURPOSE Pre-openi		Routine Follow-up			ner									
FROZEN DE		approved Not Applicable	SEWAGE DISPO				JPPL\		NON	COM	MUNITY	PRIVATE		
License		THOU THOU THOU THOU THE PRINCE OF THE PRINCE	PUBL PRIV			JOIVIIV	IOINII	1			oled	Results .		
			RISK FA	CTORS	AND	INTE	RVEN	TIONS						
		oreparation practices and emplo eaks. Public health interventio								ontrol a	and Prevention as con	tributing facto	rs in	
Compliance	oo oatbi	Demonstration of		COS			npliance			Po	tentially Hazardous Fo	oods	COS	S R
IN OUT	Person in charge present de		monstrates knowledge	strates knowledge,		IN OUT N/O N/A		Dropor cooking time and temperature						
IN		Employee H						N/O N/A						
IN OUT		Management awareness; poli Proper use of reporting, restri				_		N/O N/A			ng time and temperatu olding temperatures	res		
		Good Hygienic	Practices			IN OUT N/A Proper				r cold l	holding temperatures			
IN OUT N/C		Proper eating, tasting, drinkin No discharge from eyes, nose						N/O N/A N/O N/A	Time as a public health control (proced					
		Preventing Contamin	ation by Hands					records) Consumer Advisory						-
IN OUT N/O)	Hands clean and properly was	shed			IN	OUT				advisory provided for raw or			
IN OUT N/C)	No bare hand contact with rea							undercooked food Highly Susceptible Populations			ations		
IN OUT	approved alternate method properly follows JT Adequate handwashing facilities supplied 8					IN (OUT N/O N/A Pasteurize			ed foods used, prohibited foods not				
accessible Approved Source			Source						Chemical					
IN OUT Food obtained from approved source						IN	OUT	N/A	N/A Food additives: approved and properly used Toxic substances properly identified, stored an					
IN OUT N/O N/A Food received at proper temperature					used					<u> </u>				
IN OUT N/O N/A Required records available: shellstood destruction)					liance	mance with Approved Procedures e with approved Specialized Process P plan					
		Protection from Co	ontamination					l	una m	71001	pidii		<u> </u>	
IN OUT	N/A	Food separated and protected					The letter to the left of each item indicates that item's status at the time inspection.					of the		
IN OUT N/A Food-contact surfaces cleaned & sanitize					IN = in compliance OUT = not in			OUT = not in compliar N/O = not observed	nce					
IN OUT N/C)	Proper disposition of returned reconditioned, and unsafe for	od				COS	S=Correcte			R=Repeat Item			
		Good Retail Practices are prev		OOD RE				ogene ch	omicals	and n	hysical objects into for	nde		
IN OUT		Safe Food and Wa		COS	R	IN	OUT	logens, en	cimodis,		er Use of Utensils	ous.	COS	R
		urized eggs used where require and ice from approved source						e utensils: properly stored sils, equipment and linens: properly stored, dried,						
	vvalei							handled	ed					
	Δάραι	Food Temperature Co late equipment for temperature							ngle-use/single-service articles: properly stored, use oves used properly			tored, used		-
		ved thawing methods used	CONTROL					Cioves	Utensils, Equipment and Vending					
	Therm	nometers provided and accurate							Food and nonfood-contact surfaces cleanable, proper designed, constructed, and used			le, properly		
		Food Identificatio	n					Warewa	Narewashing facilities: installed, maintained, used; test strips used			, used; test		
	Food	properly labeled; original contai									ces clean			
	Incact	Prevention of Food Conta s, rodents, and animals not pre-						Hot and	Physical Facilities			eura		
		mination prevented during food							Hot and cold water available; adequate pressure Plumbing installed; proper backflow devices			Suit		
	and di Perso	splay nal cleanliness: clean outer clot	hing, hair restraint,	-				Sewage	ewage and wastewater properly disposed					
	fingernails and jewelry Wiping cloths: properly used and stored							Toilet fo						-
	Wiping cloths: properly used and stored Fruits and vegetables washed before use						Garbage	Foilet facilities: properly constructed, supplied, cleaned Sarbage/refuse properly disposed; facilities maintained			maintained			
Dorcon in Oi-	orgo /T	itle:						Physical	l facilitie		lled, maintained, and	clean		
Person in Ch	arge / I	me. Ollica	Alknald							Date	:.			
Inspector:	ry Nh	itle: Ollica			Tel	lephoi	ne No.	PHE	S No.		ow-up: ow-up Date:	Yes	١	Мо
MO 580-1814 (9-13)	<u> </u>	7/	DISTRIBUTION: WHIT	E – OWNER	R'S COPY			CANARY - FI	LE COPY		•			E6.37

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE



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ESTABLISHMEN [*]	T NAME	ADDRESS			CITY/ZII	CITY/ZIP			
FOO	OD PRODUCT/LOCATION	TEMP. in ° F		FOOD PRODU	JCT/ LOCAT	TION	TEMP. in ° F		
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIO elimination, prevention or re E IMMEDIATE ACTION wi	ORITY ITEMS eduction to an a othin 72 hours o	cceptable level, haza or as stated.	ırds associate	d with foodborne illness	Correct by (date)	Initial	
Code		CCC	ORE ITEMS				Correct by	Initial	
Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.								
		EDUCATION I	PROVIDED O	R COMMENTS					
Person in Ch	arge /Title:	adbugg				Date:			
Inspector: 05 MO 580-1814 (9-13)	en Mays	DISTRIBUTION: WHITE - OWN	IEB'S COPY	Telephone No.	PHES No.	Follow-up: Follow-up Date:	Yes	No E6.37A	