

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 MA WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MA ESTABLISHMENT NAME: OWNER:									COMPL	_Y	
ADDRESS:					ESTABLISHMENT NUMBER				R: COUNTY:		
CITY/ZIP: PHONE:				FAX:				P.H. PRIORITY: H	М	L	
ESTABLISHMENT TYPE BAKERY C. STORE CATERER DEL RESTAURANT SCHOOL SENIOR CENTER SUM		LI MMER F.P.		GROCERY STOR TAVERN			RE INSTITUTION MOBILE VI TEMP.FOOD			RS	
PURPOSE Pre-opening	Routine Follow-up		Other						TEIVII II OOD		
FROZEN DESSER	RT Disapproved Not Applicable	SEWAGE DISPOS				UPPL (UNI)		NON-C	COMMUNITY PRIVAT	 F	
License No.		PRIVA		_	, C.I.I.I.		•		Sampled Results		
	•	RISK FAC									
	d preparation practices and emplo breaks. Public health interventic								ntrol and Prevention as contributing fac	ors in	
Compliance	Demonstration of	Knowledge	COS	R	Co	mpliand	ce		Potentially Hazardous Foods	CC	S R
IN OUT	Person in charge present, der	nonstrates knowledge,			IN (OUT	N/O N/A	Proper	cooking, time and temperature		
	and performs duties Employee F	lealth			IN (OUT	N/O N/A	Proper	reheating procedures for hot holding	_	
IN OUT	Management awareness; poli					OUT	N/O N/A	Proper	cooling time and temperatures		
IN OUT	Proper use of reporting, restri					OUT	N/O N/A		hot holding temperatures		
IN OUT N/O	Good Hygienic Proper eating, tasting, drinking					OUT OUT	N/A N/O N/A		cold holding temperatures date marking and disposition	_	
IN OUT N/O	No discharge from eyes, nose						N/O N/A	Time a	s a public health control (procedures /		
114 001 14/0	Droventing Contemin	ation by Handa	_		IIN	001	IN/O IN/A	records		$-\!\!\!\!-$	
IN OUT NO	Preventing Contamin Hands clean and properly was					0117		Consu	Consumer Advisory mer advisory provided for raw or		
IN OUT N/O	,				IN	OUT	N/A		ooked food		
IN OUT N/O	No bare hand contact with rea approved alternate method pr								Highly Susceptible Populations		
IN OUT	Adequate handwashing facilit accessible	es supplied &			IN (OUT	N/O N/A	Pasteu offered	rized foods used, prohibited foods not		
	Approved S								Chemical		
IN OUT	Food obtained from approved				IN	OUT	N/A		dditives: approved and properly used		
IN OUT N/O N					IN	OUT		used	substances properly identified, stored an	u	
	Required records available: shellstock tags, parasite				Complia			Compli	informance with Approved Procedures fance with approved Specialized Proces	is	
IN OUT N/O N/	destruction	• • • • • • • • • • • • • • • • • • • •			IN	001	N/A		ACCP plan	<u> </u>	
IN OUT	Protection from Co		-		The	lattar	to the left (of each ite	em indicates that item's status at the tim	e of the	
	Total contest conference designed 0 conditioned				inspection.						
IN OUT N/A Proper disposition of returned, previously served,					IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed						
114 001 14/0	reconditioned, and unsafe foo		OD DET	A II . D			S=Correct	ed On Site	e R=Repeat Item		
	Good Retail Practices are prev		OD RETA					nemicals	and physical objects into foods.		
IN OUT	Safe Food and Wa			R	IN	OUT	inogens, ci		Proper Use of Utensils	COS	R
	teurized eggs used where require	d						utensils: p	properly stored		
Wa	ter and ice from approved source						Utensil: handled		ent and linens: properly stored, dried,		
	Food Temperature Co	ontrol							e-service articles: properly stored, used	+	
Ade	equate equipment for temperature						Gloves	used prop	perly		
	proved thawing methods used						F		sils, Equipment and Vending		
The	ermometers provided and accurate	}							od-contact surfaces cleanable, properly ucted, and used		
	Food Identification	n						ashing fac	cilities: installed, maintained, used; test		
Foo	od properly labeled; original contain								surfaces clean		
	Prevention of Food Conta						11.1		Physical Facilities		
Cor	s, rodents, and animals not present mination prevented during food preparation, storage							cold water available; adequate pressure ng installed; proper backflow devices			
Per	display sonal cleanliness: clean outer clot	hing, hair restraint,					Sewage	e and was	stewater properly disposed		
fing	ernails and jewelry ping cloths: properly used and store	ed					Toilet fa	acilities: n	roperly constructed, supplied, cleaned	+-	
Frui	its and vegetables washed before	use					Garbag	je/refuse j	properly disposed; facilities maintained	工	
	/ / /	3						al facilities	s installed, maintained, and clean		
Person in Charge	/Title								Date:		
Inspector: Late	lyn recount			Tel	epho	ne No	PHE		Follow-up: Yes Follow-up Date:		No

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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FOOD ESTABLISHMENT INSPECTION REPORT

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ESTABLISHMEN [*]	T NAME	ADDRESS		CITY/ZII	P		
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODU	JCT/ LOCAT	T/ LOCATION		n ° F
Code		PRIORITY	ITEMS			Correct by	Initial
Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	elimination, prevention or reduction of redu	n to an acceptable level, naza 2 hours or as stated.	ards associate	d with foodborne iliness	(date)	/.
							44
							1/
							48
							14
							71
Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	CORE IT a, operational controls, facilities or sets). These items are to be correct	structures, equipment design,	general maint	enance or sanitation stated.	Correct by (date)	Initial
	-						14
							71
		EDUCATION PROV	IDED OR COMMENTS				
	,	_					
Person in Ch	arge /Title: SIEVE T	Proj-			Date:		
Inspector:	Catilyn Peccus	<u> </u>	Telephone No.	PHES No.	Follow-up: Follow-up Date:	Yes	No
	/ M 1 O COOO -		l		i oliow-up Dale.		

MO 580-1814 (9-13)