

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 INSPE	CTION, OR SUCH SHORTER PE	RIOD OF TIME AS MA	AY BE SPEC	CIFIED I	N WRIT	ING BY T	HE REGU	ACILITIES WHICH MUST BE CORREC JLATORY AUTHORITY. FAILURE TO U			
ESTABLISHMENT		OWNER:	IN THIS NOTICE MAY RESULT IN CESSATION OWNER:				PERSON IN CHARGE:				
ADDRESS:				ESTABLISHMENT NUMBER:			R: COUNTY:	COUNTY:			
CITY/ZIP:		PHONE:	PHONE:		FAX:			P.H. PRIORITY : H	М	L	
ESTABLISHMENT TYPE BAKERY RESTAURANT PURPOSE	C. STORE CATERE SCHOOL SENIOR		l MER F.P.		GROCEI	RY STOR	E	INSTITUTION MOBILE VI TEMP.FOOD	ENDOR	S	
Pre-opening	Routine Follow-up	Complaint	Other								
FROZEN DESSERT Approved Disapproved Not Applicable License No			COMMUNITY NON-CO					MMUNITY PRIVATE mpled Results			
		RISK FACT	FORS AND) INTE	RVENT	IONS					
	preparation practices and employe eaks. Public health intervention							trol and Prevention as contributing facto	rs in		
Compliance	Demonstration of Kr				mpliance			Potentially Hazardous Foods	CO	S R	
IN OUT	Person in charge present, demo and performs duties	instrates knowledge,		IN (OUT N	I/O N/A	Proper of	cooking, time and temperature			
	Employee Hea			IN (I/O 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			
	Good Hygienic Pr	actices			IN OUT N/A Prope		Proper of	roper cold holding temperatures			
IN OUT N/O	Proper eating, tasting, drinking on No discharge from eyes, nose a					Time as a		date marking and disposition a public health control (procedures /			
IN OUT N/O				IN	OUT N	I/O N/A	records))	_		
IN OUT N/O	Preventing Contaminati Hands clean and properly wash			IN	OUT	N/A		Consumer Advisory ner advisory provided for raw or loked food			
IN OUT N/O	No bare hand contact with ready							Highly Susceptible Populations			
IN OUT Adequate handwashing facilities s accessible				IN (Pasteuri offered	ed foods used, prohibited foods not			
	Approved Sou						Unered	Chemical			
IN OUT	Food obtained from approved so Food received at proper temper				OUT	N/A		Iditives: approved and properly used ubstances properly identified, stored and			
IN OUT N/O N/A				used		used					
IN OUT	Food in good condition, safe and			Complia			formance with Approved Procedures ance with approved Specialized Process	_			
IN OUT N/O N/A	T N/O N/A Required records available: shellstock tags, pa destruction Protection from Contamination						CCP plan				
IN OUT N/A	Food separated and protected	ammation		The	letter to	the left o	f each iter	n indicates that item's status at the time	of the		
IN OUT N/A				IN = in compliance OUT = not in compliance							
Proper dispesition of returned, proviously		reviously served,		N/A = not applicable			icable	N/O = not observed			
IN OUT N/O	reconditioned, and unsafe food					=Correcte	d On Site	R=Repeat Item			
	Good Retail Practices are preven		OD RETAIL			oaens. ch	emicals. a	and physical objects into foods.			
IN OUT	Safe Food and Water		COS R	IN	OUT		P	Proper Use of Utensils	COS	R	
	urized eggs used where required and ice from approved source							operly stored ent and linens: properly stored, dried,			
Willow -						handled					
Adequ	Food Temperature Contro Adequate equipment for temperature cont			-			Single-use/single-service articles: properly stored Gloves used properly				
Appro	Adequate equipment for temperature content of						Utensils, Equipment and Vending				
Thermometers provided and accurate							Food and nonfood-contact surfaces cleanable, properly				
	Food Identification						esigned, constructed, and used /arewashing facilities: installed, maintained, used; test				
Food properly labeled; original container							Nonfood-contact surfaces clean				
Prevention of Food Contamination Insects, rodents, and animals not present				_		Hot and	cold wate	Physical Facilities er available; adequate pressure			
	reparation, storage						d; proper backflow devices	ļ			
and display Personal cleanliness: clean outer clothing, hair res		ng, hair restraint.				Sewage	and wast	ewater properly disposed			
finger									<u> </u>		
Wiping cloths: properly used and stored Fruits and vegetables washed before use				-		Toilet facilities: properly constructed, supplied, cleaned Garbage/refuse properly disposed; facilities maintained					
	×						I facilities	installed, maintained, and clean			
Person in Charge /T	itle: Ward (In	Hrs.					[Date:			
Inspector: Remaining	Ittle: Derserver (1pr ZMarkay Kottilyno Pe	cent	Т	elepho	ne No.	PHE		Follow-up: Yes Follow-up Date:	١	No	
MO 580-1814 (9-13)	()	DISTRIBUTION: WHITE -	OWNER'S COF	γ	(CANARY – FI		e up Bulo.		E6.37	



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	OOD ESTABLISHMEN			PAGE 2	of	
ESTABLISHMEN	IT NAME	ADDRESS		CITY /ZIP		
FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT	/ LOCATION	TEMP.	in ° F
Code Reference	Priority items contribute directly t or injury. These items MUST RE	PRIORITY I o the elimination, prevention or reduction ECEIVE IMMEDIATE ACTION within 72	TEMS to an acceptable level, hazards hours or as stated.	associated with foodborne illne	ss (date)	Initial
						N
						15
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						L
						\mathcal{N}
						N
						J.
Code		CORE ITE	:MS		Correct by	Initial
Reference	Core items relate to general sani standard operating procedures (tation, operational controls, facilities or s SSOPs). These items are to be correc	tructures, equipment design, gen	neral maintenance or sanitation tion or as stated.	(date)	intia
						N
						-0
						- Sl
						D
						7
						N
		EDUCATION PROVI	DED OR COMMENTS			
Person in C	harge /Title:	due Tote		Date:		
Inspector:		hyro Peccut		HES No. Follow-up: Follow-up Date:	Yes	No
MO 580-1814 (9-13		DISTRIBUTION: WHITE - OWNER'S COP	Y CANARY – FILE COPY			E6.37A

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ESTABLISHMEN	ABLISHMENT NAME ADDRESS CITY /ZIP			0				
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODU	CT/ LOCAT	ION	TEMP. in ° F		
Code		PRIORITY I	TEMS			Correct by	Initial	
Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	elimination, prevention or reduction /E IMMEDIATE ACTION within 72	n to an acceptable level, haza hours or as stated.	rds associated	d with foodborne illness	(date)	Intida	
Code		CORE ITE	MS			Correct by	Initial	
Reference	Core items relate to general sanitation standard operating procedures (SSOF	n, operational controls, facilities or s Ps). These items are to be correc	tructures, equipment design, ted by the next regular insp	general mainte ection or as	enance or sanitation stated.	(date)		
							-	
		EDUCATION PROVI	DED OR COMMENTS					
Person in Ch	arge /Title: Driver Pury A Mullay Katilyw Peau	Tpt			Date:			
Inspector:	Renze Katilyn Pear	jt i	Telephone No.	PHES No.	Follow-up: Follow-up Date:	Yes	No	
MO 580-1814 (9-13)		DISTRIBUTION: WHITE - OWNER'S COF	PY CANARY – FILE C	OPY			E6.37A	