

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 RO	UTINE	INSPEC		ERIOD OF TIME AS I	MAY BE	SPEC	IFIED	IN WRI	TING BY 1	HE REC	GULA	ILITIES WHICH MUST BE CORR TORY AUTHORITY. FAILURE T		
ESTAB				OWNER:	IVIAT KE	SULI	IN CE	SSATIC	DN OF TO	UK FOC	JD OF	PERSON IN CHARGE:		
ADDRE	ESS:			'			EST	ABLIS	HMENT	NUMBI	ER:	COUNTY:		
CITY/Z	IP:			PHONE:			FAX	:				P.H. PRIORITY: H	М	L
	SHMENT AKERY STAUF		C. STORE CATER SCHOOL SENIO		ELI MMER F	=.P.		GROCE AVERN	RY STOR	E		ISTITUTION MOBILE	VENDO	RS
PURPOS Pro	E e-openi	ng	Routine Follow-up	Complaint	Oth	er								
FROZE Appro			approved Not Applicable	SEWAGE DISPOS	_			UPPL\				IMUNITY PRIVAT		
	License	No		PRIV		AND	INITE		TIONO	Date	Jan	ipieu itesuit	·	
Dick for	toro or	o food n	reporation practices and employ	RISK FAC						0000 Cr	ntrol	and Prevention as contributing fac	otoro in	
foodborr	ne illnes		eaks. Public health intervention	ns are control measur	es to pre	event fo	oodbor	ne illne	ss or injury		JIIIIOI	and Prevention as contributing la		
Complian	ce		Demonstration of I Person in charge present, dem		cos	R	1	mpliance		Dropo		otentially Hazardous Foods king, time and temperature	C	OS R
IN OU	IT		and performs duties	•			IN	OUT I	N/O N/A	•				
IN OL	ıT		Employee H Management awareness; police			_	IN IN		N/O N/A			eating procedures for hot holding ing time and temperatures		
IN OL			Proper use of reporting, restrict						N/O N/A			holding temperatures		
IN	IT N/O		Good Hygienic F					OUT	N/A			holding temperatures		
IN OU			Proper eating, tasting, drinking No discharge from eyes, nose			-			N/O N/A			e marking and disposition public health control (procedures /		
IN OU	JI IN/C	,			_		IN	OUT	N/O N/A	record	s) ·	Caracina Adida an	_	
IN OL	JT N/O		Preventing Contamina Hands clean and properly was				IN	OUT	N/A			Consumer Advisory advisory provided for raw or ad food		
IN OU	JT N/C	1	No bare hand contact with rea	dy-to-eat foods or						under		ghly Susceptible Populations		
			approved alternate method pro Adequate handwashing facilitie				1			Paster	ırizec	I foods used, prohibited foods not		
IN OU	, i		accessible				IN	OUT	N/O N/A	offered				
IN OU	IT		Approved So Food obtained from approved				IN	OUT	N/A	Chemical /A Food additives: approved and properly used				
IN OU	JT N/C) N/A	Food received at proper temper					OUT		Toxic substances properly identified, stored and used			nd	
IN OU	JT		Food in good condition, safe a									mance with Approved Procedures		
IN OU	T N/C	N/A	Required records available: sh destruction	elistock tags, parasite			IN	OUT	N/A			e with approved Specialized Proce P plan	SS	
			Protection from Co					1.111		. t. 21		Part of the Property of the Property	6 (1)	
IN OU	ΙΤ	N/A	Food separated and protected					letter to ection.	o the left o	f each it	em in	dicates that item's status at the tir	ne of the	
IN OU	JT	N/A	Food-contact surfaces cleaned				1		in complia			OUT = not in compliance N/O = not observed		
IN OU	JT N/C)	Proper disposition of returned, reconditioned, and unsafe food						not appl= S=Correcte		te	R=Repeat Item		
					OOD RE	TAIL I	PRACT	TICES						
	OUT		Good Retail Practices are preven		ontrol the	-	_	of path	nogens, ch	emicals,		· · · · · · · · · · · · · · · · · · ·	COS	LD
IN	001	Paster	Safe Food and Wat urized eggs used where required		005	R	IN	001	In-use u	tensils:		er Use of Utensils erly stored	COS	R
			and ice from approved source						Utensils	, equipn		and linens: properly stored, dried,		
			Food Temperature Co	ntrol					handled Single-u		e-ser	vice articles: properly stored, used	1	
			ate equipment for temperature	control					Gloves	used pro	perly			
			ved thawing methods used cometers provided and accurate				-		Food an			Equipment and Vending Intact surfaces cleanable, properly		
		11101111	·						designe	d, const	ructe	d, and used		
			Food Identification						strips us	ed		s: installed, maintained, used; tes	:	
		Food	oroperly labeled; original contain Prevention of Food Contain				1		Nonfood	d-contac		aces clean nysical Facilities		
		Insect	s, rodents, and animals not pres								ter av	/ailable; adequate pressure		
		Conta and di	mination prevented during food splay	oreparation, storage					Plumbin	g install	ed; pı	roper backflow devices		
		Person	nal cleanliness: clean outer cloth	ing, hair restraint,					Sewage	and wa	stewa	ater properly disposed		
			nails and jewelry g cloths: properly used and store	d			1		Toilet fa	cilities: r	rope	rly constructed, supplied, cleaned		
			and vegetables washed before						Garbage	e/refuse	prope	erly disposed; facilities maintained		
Person	in Ch	arge /T	itle: 0				1		Physica	i tacilitie	s inst Dat	alled, maintained, and clean		
1 61301	011	ا ب عنواند 	Kogunsh								_bat	<u> </u>		
Inspec	tor:	Mla	itle: kozunn Luis F Zeurich			Те	lepho	ne No.	EPH	S No.		ow-up: Yes ow-up Date:		No



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ESTABLISHMEN	T NAME	ADDRESS		CITY/ZII	.		
FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODU	CT/ LOCAT	TON	TEMP. ir	۱°F
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIORITY ITEN elimination, prevention or reduction to E IMMEDIATE ACTION within 72 hor	IS an acceptable level, haza urs or as stated.	rds associate	d with foodborne illness	Correct by (date)	Initial
							7. 7. 7. V. V. V.
Code Reference	Core items relate to general sanitation standard operating procedures (SSOP	CORE ITEMS , operational controls, facilities or structed.	tures, equipment design,	general maint	enance or sanitation	Correct by (date)	Initial
	standard operating procedures (000)	o). These items are to be corrected	by the next regular map	ection or as	Stateu.		r'S
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		EDUCATION DROVED					
		EDUCATION PROVIDE	D OK COMMENTS				
Person in Ch	arge /Title:	den			Date:		
Inspector:	Mlanie & Leunich	DISTRIBUTION: WHITE _ OWNER'S COPY	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No F6 374



FOOD ESTABLISHMENT INSPECTION REPORT

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ESTABLISHMEN	T NAME	ADDRESS		CITY/ZII			
FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODU	ICT/ LOCAT	ION	TEMP. ir	n° F
Code		PRIOR	ITY ITEMS			Correct by	Initial
Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	elimination, prevention or reduced in the control of the control o	uction to an acceptable level, haza in 72 hours or as stated.	rds associate	d with foodborne illness	(date)	
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Code Reference	Core items relate to general sanitation, standard operating procedures (SSOP	operational controls, facilities	E ITEMS s or structures, equipment design, prrected by the next regular insp	general maint	enance or sanitation stated.	Correct by (date)	Initial
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		EDUCATION PF	ROVIDED OR COMMENTS				
Person in Ch	narge /Title:	ates			Date:		
Inspector:	Mlanie & Lewnick	-	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No



FOOD ESTABLISHMENT INSPECTION REPORT

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ESTABLISHMEN'	T NAME	ADDRESS			CITY/ZII			
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Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	, operational controls, facilities	E ITEMS s or structures, prrected by the	equipment design, e next regular insp	general maint	enance or sanitation stated.	Correct by (date)	Initial
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		EDUCATION PR	ROVIDED OR	COMMENTS				
Person in Ch	arge /Title:	atin				Date:		
Inspector:	Mlanie / Tenrich			Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No
	Thlame & Leunion	DISTRIBUTION: WHITE _ OWNER		CANARY - FILE C	0.001	i oliow-up Date.		F6 37Δ



FOOD ESTABLISHMENT INSPECTION REPORT

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ESTABLISHMEN	T NAME	ADDRESS		CITY/ZII	0		
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Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIORI elimination, prevention or redu /E IMMEDIATE ACTION withi	TY ITEMS ction to an acceptable level, haza n 72 hours or as stated.	ırds associate	d with foodborne illness	Correct by (date)	Initial
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Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	, operational controls, facilities	EITEMS or structures, equipment design, rrected by the next regular insp	general maint	enance or sanitation stated.	Correct by (date)	Initial
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		EDUCATION PR	OVIDED OR COMMENTS				K.S.
Person in Ch	narge /Title:	<u> </u>			Date:		
Inspector:	Mlanie F Zenrich	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No



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ESTABLISHMEN	STABLISHMENT NAME ADDRESS CITY/ZIP			P			
FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODU	JCT/ LOCAT	TION	TEMP. ir	n°F
Code		PRIORITY	TEMS			Correct by	Initial
Reference	Priority items contribute directly to the or injury. These items MUST RECEIVED	elimination, prevention or reductio /E IMMEDIATE ACTION within 72	n to an acceptable level, haza 2 hours or as stated.	ards associate	d with foodborne illness	(date)	
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Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	CORE ITI n, operational controls, facilities or s Ps). These items are to be correct	structures, equipment design,	general maint	enance or sanitation stated.	Correct by (date)	Initial
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Person in Ch	harge /Title:	*			Date:		
Inspector:	Mlanie Leunich	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No
110 500 1011 10 10	Manu & Leurich	DIOTRIDUTION, WHITE OWNERS OF	DV	L	i oliow-up Date.		E0.07:



FOOD ESTABLISHMENT INSPECTION REPORT

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FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODU	ICT/ LOCAT	TION	TEMP. ir	۱° F
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	or injury. These items MOST RECEIV	E IMMEDIATE ACTION WITH	n 72 hours or as stated.				
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Person in Ch	parge /Title:	<u> </u>			Date:		
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