

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 R	OUTINE	INSPE	TION THIS DAY, THE ITEMS N CTION, OR SUCH SHORTER P	ERIOD OF TIME AS N	MAY BE	SPEC	IFIED	IN WRI	TING BY 1	THE REG	ULATORY AUTHORITY.			
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED ESTABLISHMENT NAME:			OWNER:						01(100)		PERSON IN CHARGE:			
ADDRESS:					ESTABLISHMEN				HMENT	NUMBE	R: COUNTY:			
CITY/ZIP:			PHONE:	PHONE:			FAX:			P.H. PRIORITY	: Н	М	L	
ESTABLISHMENT TYPE BAKERY C. STORE CATERER RESTAURANT SCHOOL SENIOR CEN					DELI GROCERY STOR					RE INSTITUTION MOBILE VENDORS TEMP.FOOD				
PURPO:	SE re-openi	ng	Routine Follow-up	Complaint	Oth	er								
FROZEN DESSERT Approved Disapproved Not Applicable			SEWAGE DISPOS	GE DISPOSAL WATER SUPPLY COMMUNITY					NON-COMMUNITY PRIVATE Date Sampled Results					
	License	No		PRIV						Date	Sampled	Results	·	
Di L C			The state of the s	RISK FAC							1.115	at the transfer		
			preparation practices and employ eaks. Public health interventio								ntrol and Prevention as co	ontributing fac	tors in	
Complia	nce		Demonstration of		COS	R	Co	mpliance	Э		Potentially Hazardous		CO	S R
IN O	UT		Person in charge present, den and performs duties	Person in charge present, demonstrates knowledge, and performs duties			IN OUT N/O N/A		A Proper cooking, time and temperature					
			Employee H						N/O N/A		reheating procedures for			
	UT UT		Management awareness; police Proper use of reporting, restrict				_		N/O N/A		cooling time and tempera hot holding temperatures			
			Good Hygienic F					OUT	N/A		cold holding temperature			
	UT N/C		Proper eating, tasting, drinking				IN	OUT	N/O N/A		date marking and disposi			
IN O	UT N/C)	No discharge from eyes, nose				IN	OUT	N/O N/A	records		,		
IN O	UT N/O)	Preventing Contamina Hands clean and properly was				IN	OUT	N/A		Consumer Adviso mer advisory provided for			+
IN O	UT N/C	`	No bare hand contact with rea	dy-to-eat foods or			1			underco	ooked food Highly Susceptible Pop	ulations		
		,	approved alternate method pro Adequate handwashing facilitie				P			Pasteu	rized foods used, prohibit	ed foods not		
accessible							offered	<u> </u>						
		Approved So Food obtained from approved				IN OUT N/A		N/A	Chemical Food additives: approved and properly used					
IN OUT N/O N/A		O N/A	Food received at proper temperature				IN OUT			Toxic substances properly identified, stored and used				
IN O	IN OUT		Food in good condition, safe and unadulterated Required records available: shellstock tags, parasite				 			Conformance with Approved Procedures Compliance with approved Specialized Process				
IN O	UT N/C	O N/A	destruction	n S 7 1			IN OUT N/A		N/A	and HACCP plan				
			Protection from Co											
IN O	UT	N/A	Food separated and protected					The letter to the left of inspection.			m indicates that item's sta	atus at the tim	ie of the	
IN O	UT	N/A	Food-contact surfaces cleaned				IN = in compli N/A = not app							
IN o	IN OUT N/O		Proper disposition of returned, previously served, reconditioned, and unsafe food						. = not appi S=Correcte		N/O = not observed R=Repeat Item			
			,		OOD RE	TAIL	PRACT	ΓICES			·			
	·		Good Retail Practices are preven					_	nogens, ch			foods.		-
IN	OUT		Safe Food and Wat urized eggs used where required		COS	R	IN	OUT	In-use u	Proper Use of Utensils utensils: properly stored			COS	R
			and ice from approved source						Utensils	ls, equipment and linens: properly stored, dried,		tored, dried,		
			Food Temperature Co	ntrol			-	-	handled	d use/single-service articles: properly stored, used				
		Adequ	uate equipment for temperature				1			used prop		storeu, useu		
		Approved thawing methods used Thermometers provided and accurate									ils, Equipment and Vendi			
											d-contact surfaces cleana ucted, and used	able, properly		
			Food Identification	ı						shing fac	ilities: installed, maintaine	ed, used; test		
		Food	properly labeled; original contain					Nonfood-contact						
		Incod	Prevention of Food Conta						Hot and	cold wat	Physical Facilities	200110		
		Insects, rodents, and animals not present Contamination prevented during food prep					1				er available; adequate prod; d; proper backflow device			+
	and display					-				····			1	
	Personal cleanliness: clean outer clothing fingernails and jewelry			•			<u> </u>		Sewage	ge and wastewater properly disposed				
	Wiping cloths: properly used and stored		ed							roperly constructed, supp				
		Fruits	and vegetables washed before				1-				properly disposed; facilitie installed, maintained, an			
Perso	n in Ch	arge /T	itle:	1 1 1 2 1 1			1				Date:	- 2.00.1		
		_	Report was email	"ed to Rozier's		1-		. .			E 11		-	
Person in Charge /Title: Report was emailed to Rozier's Inspector: Lathyn County					le	iepno	ne No	. PHE		Follow-up: Follow-up Date:	Yes	ľ	No	



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FOOD ESTABLISHMENT INSPECTION REPORT

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ESTABLISHMENT NAME		ADDRESS		CITY/ZII	.		
FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODU	JCT/ LOCAT	TION	TEMP. ii	n ° F
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIORITY elimination, prevention or reduction /E IMMEDIATE ACTION within 72	ITEMS in to an acceptable level, haza 2 hours or as stated.	ards associate	d with foodborne illness	Correct by (date)	Initial
							cim
							cim
							cim
							cim
Code		CORE IT	EMS			Correct by	Initial
Reference	Core items relate to general sanitation standard operating procedures (SSOF	, operational controls, facilities or	structures, equipment design,	general maint pection or as	enance or sanitation stated.	(date)	
							cim
							cim
							cim
							cim
		EDUCATION PROV	IDED OR COMMENTS				
Person in Ch	narge /Title:	De de la Contraction			Date:		
	Report was emai	uea to Rozier's	Telephone No.	PHES No.	Follow-up:	Yes	No
.,	Catalyn Yecust		7 5.50.101101101		Follow-up Date:		