

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		ERIOD OF TIME AS N	MAY BE	SPEC	IFIED	IN WRI	TING BY 1	HE REC	GULA	ILITIES WHICH MUST BE CORRE TORY AUTHORITY. FAILURE TO DEPATIONS		
	BLISHN			OWNER:	WAT IL	.00L1	III OL	OOATIC	<u> </u>	01(100	<i>I</i> D 01	PERSON IN CHARGE:		
ADDR	ESS:					ESTABLISHMENT NUMBER				NUMBI	ER:	COUNTY:		
CITY/2				PHONE:	PHONE: FAX:						P.H. PRIORITY: H	M	L	
B. R	ESTABLISHMENT TYPE BAKERY C. STORE CATERER RESTAURANT SCHOOL SENIOR CENTE				ELI MMER F	F.P.		GROCE AVERN	ERY STOR	!E		ISTITUTION MOBILE '	/ENDOF	RS
PURPO:	SE re-openi	ng	Routine Follow-up	Complaint	Oth	er								
_	EN DES		approved Not Applicable	SEWAGE DISPOS PUBL	IC			UPPL\				IMUNITY PRIVATI		
	License	No		PRIVA RISK FAC		AND	INITE	D\/ENI	TIONS	Date	Oan	Tresuits		
Dick fo	ctore or	o food r	reparation practices and employ							0250 Cr	ntrol	and Prevention as contributing fac-	ore in	
foodbo	rne illnes		eaks. Public health intervention	ns are control measur	es to pre	event fo	oodbor	ne illne	ss or injury		JIIII OI	and Frevention as contributing fac		
Complia	nce		Demonstration of l		cos	R	1	mpliance		Dropo		otentially Hazardous Foods king, time and temperature	CC	S R
IN O	UT		and performs duties	•			IN	OUT I	N/O N/A					
IN O	LIT		Employee H Management awareness; police			-	IN IN		N/O N/A			eating procedures for hot holding ing time and temperatures		
·	<u>UT</u> UT		Proper use of reporting, restrict				_		N/O N/A			holding temperatures		
IN 01	UT N/O		Good Hygienic F					OUT	N/A			holding temperatures		
	UT N/O		Proper eating, tasting, drinking No discharge from eyes, nose			-			N/O N/A			e marking and disposition bublic health control (procedures /		
IN O	UT N/C)					IN	OUT	N/O N/A	record		· ·		
IN O	UT N/O	1	Preventing Contamina Hands clean and properly was				IN					Consumer Advisory r advisory provided for raw or ked food		
IN O	UT N/C)	No bare hand contact with rea				dila		under		ghly Susceptible Populations			
	approved alternate method prope IN OUT Adequate handwashing facilities s								ed foods used, prohibited foods not					
			accessible Approved So	ource			-			offere	<u> </u>	Chemical		
IN O	IN OUT Food obtained from approved sour		source							itives: approved and properly used				
IN O	UT N/C	O N/A	Food received at proper temper	erature					Toxic	subst	substances properly identified, stored and			
IN O	UT		Food in good condition, safe a									mance with Approved Procedures		
IN O	UT N/C	N/A	Required records available: sh destruction	ellstock tags, parasite			IN	OUT	N/A			e with approved Specialized Proces Piplan	S	
			Protection from Co									· -		
IN O	UT	N/A	Food separated and protected				The letter to the left of each item indicates inspection.			dicates that item's status at the tim	e of the			
IN O	UT	N/A	Food-contact surfaces cleaned	1 & sanitized			IIIO		in complia	ance	OUT = not in compliance			
IN o	UT N/C)	Proper disposition of returned,				N/A = not applicable COS=Corrected On S							
			reconditioned, and unsafe food		OOD RE	TAIL	PRACT		5-Correcte	u On or	ic	N-Nepeat item		
			Good Retail Practices are preve						nogens, ch	emicals,	and	physical objects into foods.		
IN	OUT		Safe Food and Water	-	COS	R	IN	OUT				er Use of Utensils	COS	R
			urized eggs used where required and ice from approved source	1			1					erly stored and linens: properly stored, dried,		+
				e feet			-		handled	<u> </u>				
		Adea	Food Temperature Co late equipment for temperature of	control			1			ise/singl used pro		vice articles: properly stored, used		
		Appro	ved thawing methods used	70111101						Uten	sils, E	Equipment and Vending		
		Therm	ometers provided and accurate									intact surfaces cleanable, properly d, and used		
			Food Identification	l .						shing fa		s: installed, maintained, used; test		
		Food	properly labeled; original contain									aces clean		
		Incoct	Prevention of Food Contag s, rodents, and animals not pres				-		Hotond	cold		nysical Facilities vailable; adequate pressure		-
			s, rodents, and animals not pres mination prevented during food				1					roper backflow devices		1
		and di	splay	, ,			<u> </u>					•		-
			nal cleanliness: clean outer cloth nails and jewelry	ınıg, nair restraint,								ater properly disposed		
		Wiping	cloths: properly used and store						Toilet fa	cilities: p	rope	rly constructed, supplied, cleaned		
		Fruits	and vegetables washed before u	use			1-					erly disposed; facilities maintained alled, maintained, and clean		
Perso	n in Ch	arge /T	itle: (Y	- 1				1	. nyoida		Dat		1	1
			Jamon of the state	1					1 ==-:	<u> </u>				
Insped	ctor:	7/	itle: Swyng b Ulmix FLL	, ,		Ге	iepno	ne No.	. EPH	S No.		ow-up: Yes ow-up Date:		No



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ESTABLISHMENT NAME		ADDRESS			CITY/ZIP			
FO	OD PRODUCT/LOCATION	TEMP. in ° F	TEMP. in ° F FOOD PRODUC			TEMP. i	n ° F	
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIORIT elimination, prevention or reduc E IMMEDIATE ACTION within	TY ITEMS ction to an acceptable level, haza 72 hours or as stated.	ırds associate	d with foodborne illness	Correct by (date)	Initial	
							83	
Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	, operational controls, facilities	ITEMS or structures, equipment design, rected by the next regular insp	general maint	enance or sanitation stated.	Correct by (date)	Initial	
							89	
							89	
							89	
							89	
		EDUCATION PRO	OVIDED OR COMMENTS					
Person in Ch	arge /Title:				Date:			
Inspector:	Maniet II	while was	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No	



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		EDLICATION DD	OVIDED OR COMMENTS					
		EDUCATION PRI	OVIDED OR COMMENTS					
Person in Ch	arge /Title: (Y	30 HL			Date:			
Inspector:	11.	1,,,,	Telephone No.	EPHS No.	Follow-up:	Yes	No	
	Mlmit F. A.				Follow-up Date:			



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		,	, ,				89	
							89	
							NA-	
							81	
							89	
						1	SS-	
							0	
		EDUCATION PRO	OVIDED OR COMMENTS					
Person in Ch	narge /Title: (Y				Date:			
Inspector:	511	maj	Telephone No.	EPHS No.	Follow-up:	Yes	No	
•	Mlnix F. 1				Follow-up Date:			