

MO 580-1814 (9-13)

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 ROL	UTINE	INSPE		ERIOD OF TIME AS N	MAY BE	SPEC	IFIED	IN WRI	TING BY 1	HE RE	GULA	ILITIES WHICH MUST BE CORRE TORY AUTHORITY. FAILURE TO DEDATIONS		
ESTABL				OWNER:	WAT IL	OULT	III OL	OOATIC	<u> </u>	01(100	<i>I</i> D 01	PERSON IN CHARGE:		
ADDRE	SS:						ESTABLISHMENT NUMBER				ER:	COUNTY:		
CITY/ZII	P:			PHONE:			FAX	:				P.H. PRIORITY: H	М	L
RES	KERY STAUF		C. STORE CATER SCHOOL SENIO		ELI MMER F	F.P.		GROCE AVERN	ERY STOR	!E		ISTITUTION MOBILE '	/ENDOF	RS
PURPOSE Pre	: -openi	ng	Routine Follow-up	Complaint	Oth	er								
FROZEI Appro			approved Not Applicable	SEWAGE DISPOS PUBL	IC			UPPL`				MMUNITY PRIVATI		
L	icense.	No		PRIVA RISK FAC		AND	INITE	D\/ENi	TIONS	Buto	Cuii	results		
Risk fact	tors ar	e food n	reparation practices and employ							ease Co	ontrol	and Prevention as contributing fac	ors in	
foodborne	e illnes		eaks. Public health intervention	ns are control measur	es to pre	event fo	oodbor	ne illne	ss or injury					
Complianc			Demonstration of I Person in charge present, dem		COS	R	1	mpliance		Prone		otentially Hazardous Foods king, time and temperature	CC	DS R
IN OUT	Γ		and performs duties	<u> </u>					N/O N/A	·				
IN OU	т		Employee H Management awareness; police			-	IN IN		N/O N/A			eating procedures for hot holding ling time and temperatures		
IN OUT			Proper use of reporting, restric	tion and exclusion					N/O N/A	Prope	r hot	holding temperatures		
IN OUT	Γ N/O		Good Hygienic F Proper eating, tasting, drinking			_		OUT	N/A			holding temperatures e marking and disposition		
IN OUT			No discharge from eyes, nose						N/O N/A			public health control (procedures /		
IN OU	1 14/0		Drayanting Contamina	ation by Handa			IIN	001	N/O N/A	record	s)	Consumer Advisory		
IN OU	T N/O		Preventing Contamina Hands clean and properly was				IN	OUT	N/A			advisory provided for raw or ed food		
IN OUT	T N/O		No bare hand contact with rea				1			unden		ghly Susceptible Populations		
IN OUT	approved alternate method prope						OUT	NI/O NI/A	Paste	urized	d foods used, prohibited foods not			
IN 001	'	accessible Approved Source					IN	001	N/O N/A	offere		Chemical		
IN OUT	Γ		Food obtained from approved			-	IN	OUT	N/A	Food	additi	ves: approved and properly used		
IN OUT	T N/C) N/A	Food received at proper temper	erature			IN	OUT				ances properly identified, stored ar	ıd	
IN OUT	Γ		Food in good condition, safe a									mance with Approved Procedures		
IN OUT	Γ N/C	N/A	Required records available: sh destruction	ellstock tags, parasite			IN	OUT	N/A			e with approved Specialized Proces Piplan	iS	
			Protection from Co											
IN OUT	Γ	N/A	Food separated and protected					e letter to bection.	o the left o	t each it	em in	dicates that item's status at the tim	e of the	
IN OUT	Т	N/A	Food-contact surfaces cleaned					IN =	in complia			OUT = not in compliance		
IN OU	T N/O	1	Proper disposition of returned, reconditioned, and unsafe food						not appl= S=Correcte		te	N/O = not observed R=Repeat Item		
			· · · · · · · · · · · · · · · · · · ·		OOD RE	ETAIL I	PRACT	TICES				·		
	~=		Good Retail Practices are preven				-		nogens, ch	emicals				
IN (OUT	Paster	Safe Food and Wat urized eggs used where required		COS	R	IN	OUT	In-use u	tensils:		per Use of Utensils erly stored	COS	R
			and ice from approved source				1	İ	Utensils	, equipn		and linens: properly stored, dried,		
			Food Temperature Co	ntrol			1		handled Single-u		e-ser	vice articles: properly stored, used	+	
			ate equipment for temperature						Gloves	used pro	perly	,		
			ved thawing methods used cometers provided and accurate				-		Food an			Equipment and Vending ontact surfaces cleanable, properly		
		mem	iometers provided and accurate						designe	d, const	ructe	d, and used		
			Food Identification						Warewa strips us	-	cilitie	s: installed, maintained, used; test		
		Food	properly labeled; original contain						Nonfood	d-contac		aces clean		
		Insect	Prevention of Food Contains, rodents, and animals not pres				1		Hot and	cold wa		nysical Facilities vailable; adequate pressure		
		Conta	mination prevented during food									roper backflow devices		
		and di Perso	splay nal cleanliness: clean outer cloth	ning, hair restraint			1	-	Sewage	and wa	stew	ater properly disposed	+	
		fingerr	nails and jewelry				1					, .		
			g cloths: properly used and store and vegetables washed before i				1		Toilet fa	cilities: p	prope	rly constructed, supplied, cleaned erly disposed; facilities maintained	+	
		i iuito										alled, maintained, and clean	\pm	
Person	in Cha	arge /T	itle:								Dat	e:		
Inspecto	or: 、	M	ine F Z			Те	lepho	ne No.	EPH	S No.		ow-up: Yes		No



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ESTABLISHMEN	T NAME	ADDRESS	ADDRESS CITY/ZIP				
FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUC	T/ LOCAT	ION	TEMP. i	in ° F
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIORITE PRI	TY ITEMS ction to an acceptable level, hazare n 72 hours or as stated.	ds associated	d with foodborne illness	Correct by (date)	Initial
							ds
Code Reference	Core items relate to general sanitation standard operating procedures (SSOP	operational controls, facilities	ITEMS or structures, equipment design, g	eneral mainte	enance or sanitation	Correct by (date)	Initial
	standard operating procedures (330)	s). These items are to be co	Trected by the flext regular inspe	ection of as s	stateu.		ds
							ds
							ds
		EDUCATION PR	OVIDED OR COMMENTS				
Person in Ch	narge /Title:				Date:		
Inspector:	JAN U		Telephone No.	EPHS No.	Follow-up:	Yes	No
MO 580-1814 (9-13)	Manie of Line	DISTRIBUTION: WHITE - OWNER'S			Follow-up Date:		E6.37A



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	or injury. These items incor iteoeric	Z IMMEDIATE ACTION WITHIN	2 Hours of as stated.				ds
Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	CORE IT n, operational controls, facilities or Ps). These items are to be corre	structures, equipment design,	general maint	enance or sanitation stated.	Correct by (date)	Initial
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		EDUCATION PROV	VIDED OR COMMENTS				
Person in Ch	arge /Title:				Date:		
Inspector:	Mhine F L.		Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No
	" wave / Z		1	l	i oliow-up Date.		



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	standard operating procedures (000)	o). These tems are to be corre	oted by the next regular map	cotion or as	stated.		ر کی
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		EDUCATION FROM	ADED ON COMMENTS				
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rtorororo	standard operating procedures (SSOF	Ps). These items are to be corre	cted by the next regular ins	pection or as	stated.	(dato)	٨
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Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	, operational controls, facilities	ITEMS or structures, equipment design,	general maint	enance or sanitation	Correct by (date)	Initial
			OVIDED OR COMMENTS				ds ds
		EDUCATION PRO	OVIDED OR COMMENTS				
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Inspector:	Maine of Line	1	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No



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Inspector: Main f Zil	<u> </u>	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No



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Person in Ch					Date:		
Inspector:	Mhine J Zil		Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No