

TIME IN TIME OUT DATE PAGE 1 of

NEXT ROUTINE INSPE	TION THIS DAY, THE ITEMS NOT CTION, OR SUCH SHORTER PER 5 FOR CORRECTIONS SPECIFIEL	RIOD OF TIME AS MA	Y BE SPE	CIFIED I	N WRIT	ING BY T	HE REG	ULATORY AU	THORITY. F				
ESTABLISHMENT	OWNER:	AY RESUL		SATIO	N OF YOU			IS. ON IN CHAF	RGE:				
ADDRESS:		1		EST	ABLISH		NUMBE	R: COUN	COUNTY:				
CITY/ZIP:		PHONE:		FAX: P				P.H. PF	RIORITY :	Н	М	L	
ESTABLISHMENT TYPE BAKERY RESTAURANT	C. STORE CATERE		l Mer F.P.		GROCEF	RY STOR	E	INSTITUTIO TEMP.FOOD		MOBILE	VENDO	RS	
PURPOSE Pre-opening	Routine Follow-up	Complaint	Other										
	F Sapproved Not Applicable	EWAGE DISPOSA PUBLIC PRIVAT	)	ATER S COMN	UPPLY IUNITY			COMMUNITY Sampled		PRIVAT Result	Е s		
License No		RISK FACT		D INTE	RVENT	IONS							
	preparation practices and employee							ntrol and Preve	ention as cont	tributing fac	ctors in		
Compliance	eaks. Public health interventions Demonstration of Kn				ne illnes: mpliance	s or injury	<u>.</u>	Potentially I	Hazardous Fo	oods	С	OS F	
IN OUT	Person in charge present, demor	<u> </u>		IN (	OUT N	/0 N/A	Proper	cooking, time					
	and performs duties Employee Hea	lth		IN (		/0 N/A	Proper	reheating pro	cedures for h	ot holding			
IN OUT	Management awareness; policy	oresent		IN (	OUT N	/O N/A	Proper	cooling time a	nd temperatu				
IN OUT	Proper use of reporting, restrictio Good Hygienic Pra				<u>OUT N</u> OUT	I/O N/A N/A		hot holding ter cold holding te					
IN OUT N/O	Proper eating, tasting, drinking or	r tobacco use			OUT N		Proper	date marking a	and dispositio				
IN OUT N/O	No discharge from eyes, nose an	id mouth		IN	OUT N	I/O N/A	records	s a public heal s)	th control (pro	ocedures /			
	Preventing Contamination Hands clean and properly washe						Consur		ner Advisory				
IN OUT N/O				IN	OUT	N/A	undercooked food						
IN OUT N/O	No bare hand contact with ready approved alternate method proper						Highly Susceptible Populations			ations			
IN OUT	Adequate handwashing facilities accessible			IN	OUT N	/0 N/A	Pasteurized foods used, prohibited foods not offered			foods not			
	Approved Sour	се					onereu		hemical				
IN OUT				IN	OUT	N/A		dditives: appro ubstances pro			nd		
IN OUT N/O N/A	Food received at proper tempera	lure		IN	OUT		used	ubstances pro	peny identilie	a, stored a	na		
IN OUT	Food in good condition, safe and Required records available: shell							nformance with ance with appr					
IN OUT N/O N/A	destruction			IN	OUT	N/A		CCP plan			55		
	Protection from Conta Food separated and protected	amination		The	lattar to	the left of	ach ite	m indicates that	at itom'e etatı	is at the tin	ne of the		
IN OUT N/A	Food-contact surfaces cleaned &	sanitized			ection.								
	Proper disposition of returned, pr					n complia • not appli			ot in compliar ot observed	nce			
IN OUT N/O	reconditioned, and unsafe food					Correcte	d On Site	e R=Repe	at Item				
	Good Retail Practices are prevent		OD RETAI			aens che	emicals	and physical o	hiects into fo	ods			
IN OUT	Safe Food and Water		COS R		OUT	gens, en		Proper Use of		003.	COS	R	
	urized eggs used where required r and ice from approved source			+	$\vdash$			roperly stored ent and linens:		ed dried			
vvaler						handled	•••		,	, ,			
Adequ	Food Temperature Contr uate equipment for temperature cor					Single-u Gloves u		-service article	es: properly st	tored, used			
	oved thawing methods used					010763 0		ils, Equipment	and Vending	1			
Thern	nometers provided and accurate						d nonfoo	d-contact surfa	aces cleanab		'		
	Food Identification					Warewa	shing fac	ucted, and use cilities: installed		, used; test			
Food	Food properly labeled; original container					strips us		surfaces clear	1		_	_	
	Prevention of Food Contamination							Physical Fac	cilities				
Insects, rodents, and animals not present Contamination prevented during food preparation, storage				_				er available; ac d; proper back		sure		_	
and d	isplay						-						
	nal cleanliness: clean outer clothing nails and jewelry	g, hair restraint,		1		Sewage	and was	tewater proper	ly disposed	_			
Wipin	g cloths: properly used and stored							roperly constru					
Fruits	and vegetables washed before use	e						properly dispos installed, mair			_	_	
Person in Charge /1	Title:					yolodi		Date:					
	Title: Kenel Sten	Pp		Felepho		PHE	S No	Follow-up:		Yes		No	
Inspector:	nor Drady			•				Follow-up. Follow-up Da	ate:	163			
MO 580-1814 (9-13)	U	DISTRIBUTION: WHITE -	OWNER'S CC	PΥ	C	CANARY – FII	LE COPY					E6.37	



FOOD ESTABLISHMENT INSPECTION REPORT					PAGE <sup>2</sup> of			
ESTABLISHMEN	「 NAME	ADDRESS		CITY /ZIP				
FO	DD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUC	T/ LOCATION	N	TEMP. ir	۱°F	
Code		PRIORITY II	TEMS			Correct by	Initial	
Reference	Priority items contribute directly to the or injury. These items MUST RECEIN	elimination, prevention or reduction VE IMMEDIATE ACTION within 72	to an acceptable level, hazarda	s associated wi	th foodborne illness	(date)		
Code Reference	Core items relate to general sanitation standard operating procedures (SSO	CORE ITE n, operational controls, facilities or st Ps) These items are to be correct	MS tructures, equipment design, ge	neral maintena	nce or sanitation	Correct by (date)	Initial	
		EDUCATION PROVI	DED OR COMMENTS					
Person in Ch	arge /Title: 🔨 🤊			n	ate:			
Inspector:	Kenel ) St	mar	Telephone No.		ollow-up:	Yes	No	
MO 580-1814 (9-13)	Jaytor Draoly	DISTRIBUTION: WHITE - OWNER'S COP		F	ollow-up Date:		E6.37A	



FOOD ESTABLISHMENT INSPECTION REPORT					PAGE <sup>3</sup> of		
ESTABLISHMEN	Γ NAME	ADDRESS		CITY /ZIP			
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUC	T/ LOCATIO	N	TEMP. ir	۱°F
Code		PRIORITY IT	EMS			Correct by	Initial
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Code		CORE ITE	MS			Correct by	Initial
Reference	Core items relate to general sanitation standard operating procedures (SSO	n, operational controls, facilities or str Ps). These items are to be corrected	ructures, equipment design, ger ed by the next regular inspec	neral mainten tion or as sta	ance or sanitation ated.	(date)	
		EDUCATION PROVID	DED OR COMMENTS				
Person in Ch	arge /Title: Renu Soft	End			Date:		
Inspector:	Jaylor Brady		Telephone No. P	PHES No. F	Follow-up: Follow-up Date:	Yes	No
MO 580-1814 (9-13)	i i i i	DISTRIBUTION: WHITE - OWNER'S COPY	CANARY - FILE COPY	Y			E6.37A

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EPSAM_INVERVE         ADDREAD         IPTY CP           FOOD PRODUCT/LOCATION         TEMP: In * F         FOOD PRODUCT/LOCATION         TEMP: In * F           FOOD PRODUCT/LOCATION         TEMP: In * F         FOOD PRODUCT/LOCATION         TEMP: In * F           Code         PROPERTY TEMS         FOOD PRODUCT/LOCATION         TEMP: In * F           Code         PROPERTY TEMS         Control In the intervence of the entirelian intervence of associated with footborne liness         Control In the intervence of associated with footborne liness         Control In the intervence of associated with footborne liness         Control In the intervence of associated with footborne liness         Control In the intervence of associated with footborne liness         Control In the intervence of associated with footborne liness         Control In the intervence of associated with footborne liness         Control In the intervence of associated with footborne liness         Control In the intervence of associated with footborne liness         Control In the intervence of associated with footborne liness         Control In the intervence of associated with footborne liness         Control In the intervence of associated with footborne liness         Control In the intervence of associated with footborne liness         Control In the intervence of associated with footborne liness         Control In the intervence of associated with footborne lines         Control In the intervence of associated with footborne lines         Control In the intervence of associated with footborne linessociated withe next register inspection or as called.	Macces	FOOD ESTABLISHMENT INSPECTION REPORT				PAGE <sup>4</sup> of				
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Follow-up Date:		arge /Title:	End							
	Inspector: MO 580-1814 (9-13)	Jaylon Brady	DISTRIBUTION: WHITE - OWNER'S COPY			Follow-up: Follow-up Date:	Yes	No E6.37A		

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FOOD ESTABLISHMENT INSPECTION REPORT				PAGE <sup>5</sup> of				
ESTABLISHMENT	NAME	ADDRESS		CITY /ZIP				
FOC	D PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUC	CT/ LOCATIO	NC	TEMP. ir	۱°F	
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Person in Cha	arge /Title: Lene Soft	Renta -			Date:			
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MO 580-1814 (9-13)	<del>, 1</del> – <u>1</u>	DISTRIBUTION: WHITE - OWNER'S COP	Y CANARY – FILE CO		up Duto.		E6.37A	



Maccos	POOD ESTABLISHMENT INSPECTION REPORT				PAGE 6 of		
ESTABLISHMEN	Γ NAME	ADDRESS		CITY /ZIF	,		
FO	DD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUC	D PRODUCT/ LOCATION			۱°F
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Reference	Priority items contribute directly to the or injury. These items MUST RECEI	e elimination, prevention or reduction VE IMMEDIATE ACTION within 72	to an acceptable level, hazards hours or as stated.	s associated	I with foodborne illness	(date)	
Code		CORE ITE	MS		_	Correct by	Initial
Reference	Core items relate to general sanitatio standard operating procedures (SSO	n, operational controls, facilities or st Ps). <b>These items are to be correct</b>	ructures, equipment design, ge ted by the next regular inspec	eneral mainte ction or as s	enance or sanitation stated.	(date)	
		EDUCATION PROVI	DED OR COMMENTS				
Person in Ch	arge /Title: Linu Soft				Date:		
Inspector:	Saulor Branker		Telephone No. F	PHES No.	Follow-up: Follow-up Date:	Yes	No
MO 580-1814 (9-13)	inner ( ) worker	DISTRIBUTION: WHITE - OWNER'S COP	Y CANARY – FILE COP	Υ			E6.37A

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