

## 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 ROUTINE INSPE	CTION THIS DAY, THE ITEMS NO CTION, OR SUCH SHORTER PI	ERIOD OF TIME AS MA	AY BE SPEC	CIFIED	IN WRIT	ING BY T	HE REGU	LATORY AUTHORITY. FAIL			
ESTABLISHMENT I		OWNER:			3341101	NOI TO	UK I OOD	PERSON IN CHARGE:			
ADDRESS:				ESTABLISHMENT NUMBER: CO			: COUNTY:	COUNTY:			
CITY/ZIP:		PHONE:		FAX	:	P.H. PRIORITY: H			Н	М	L
ESTABLISHMENT TYPE BAKERY RESTAURANT	C. STORE CATER SCHOOL SENIOR		I MER F.P.		GROCEI AVERN	RY STOR		INSTITUTION N TEMP.FOOD	MOBILE V	'ENDOF	RS
PURPOSE Pre-opening	Routine Follow-up	Complaint	Other								
Approved Dis	Approved Disapproved Not Applicable PUBLIC			ATER SUPPLY  COMMUNITY  NON-COMMUNITY  PRIVATE  Date Sampled  Results _							
License No	-	PRIVAT		) INTE	RVENT	IONS					
	preparation practices and employ	ee behaviors most com	monly repor	ted to th	ne Cente	ers for Dis		rol and Prevention as contrib	uting facto	ors in	
foodborne illness outbr Compliance	eaks. Public health intervention  Demonstration of h				ne illnes	s or injury	/.	Potentially Hazardous Food	łs	CC	S R
IN OUT	Person in charge present, dem			_		I/O N/A	Proper co	ooking, time and temperature			
114 001	and performs duties  Employee He	ealth				I/O N/A	Proper r	eheating procedures for hot	holding		
IN OUT	Management awareness; polic	y present		IN	OUT N	I/O N/A	Proper co	ooling time and temperatures			
IN OUT	Proper use of reporting, restriction Good Hygienic F				1 TUO TUO	N/A N/A		ot holding temperatures old holding temperatures			
IN OUT N/O	Proper eating, tasting, drinking No discharge from eyes, nose					N/O N/A		ate marking and disposition a public health control (proce	duros /		
IN OUT N/O				IN	OUT N	I/O N/A	records)		edules /		
IN OUT N/O	Preventing Contamina Hands clean and properly was			IN	OUT	N/A		Consumer Advisory er advisory provided for raw o bked food	or		
IN OUT N/O	No bare hand contact with read							Highly Susceptible Population	ns		
IN OUT	approved alternate method pro Adequate handwashing facilitie			IN	OUT N	I/O N/A		zed foods used, prohibited fo	ods not		
	accessible Approved So	urce		1111	001 1	1/O 11/A	offered	Chemical			
IN OUT	Food obtained from approved s	source		IN	OUT	N/A		ditives: approved and properl			
IN OUT N/O N/A	Food received at proper tempe	rature		IN	OUT		Toxic sul used	bstances properly identified,	stored and	d	
IN OUT	Food in good condition, safe and unadulterated					Conf	Conformance with Approved Procedures				
IN OUT N/O N/A	destruction			IN	OUT	N/A Complian and HAC		ce with approved Specialized Proces CP plan		5	
IN OUT N/A	Protection from Cor Food separated and protected	ntamination		The	letter to	the left o	f each item	indicates that item's status	at the time	of the	
IN OUT N/A	Food contest surfaces alonged 0 contitued			inspection.							
Proper disposition of returned, provingely served				IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed							
IN OUT N/O	reconditioned, and unsafe food		OD DETAIL	DDAG		=Correcte	d On Site	R=Repeat Item			
	Good Retail Practices are preve		OD RETAIL			ogens, ch	emicals, ar	nd physical objects into foods	S.		
IN OUT	Safe Food and Water	er	COS R	IN	OUT		Pı	roper Use of Utensils		COS	R
	eurized eggs used where required r and ice from approved source							operly stored nt and linens: properly stored	dried		
	••					handled					
Adeq	Food Temperature Cou uate equipment for temperature of						ise/single-s used prope	service articles: properly store	ed, used		
Appro	oved thawing methods used						Utensils	s, Equipment and Vending			
Thern	nometers provided and accurate							-contact surfaces cleanable,	properly		
	Food Identification					Warewa	esigned, constructed, and used arewashing facilities: installed, maintained, used; test				
Food properly labeled; original container					strips used Nonfood-contact surfaces clean						
Incor	Prevention of Food Contamination			-	Physical Facilities  Hot and cold water available; adequate pressure						
	Insects, rodents, and animals not present  Contamination prevented during food preparation, storage							; proper backflow devices	<u> </u>		+
	and display  Personal cleanliness: clean outer clothing, hair restraint,			-		Sewane	and waste	ewater properly disposed			+
finger	nails and jewelry	nd jewelry							.1		
	ig cloths: properly used and store and vegetables washed before ι			+				perly constructed, supplied, operly disposed; facilities ma			1
	<u> </u>						l facilities in	nstalled, maintained, and clea			
Person in Charge /1	Title: The SMM	10					D	ate:			
Inspector:	Bunder		Te	elepho	ne No.	EPH			'es		No
MO 580-1814 (9-13)		DISTRIBUTION: WHITE -	OWNER'S COP	Ϋ́	(	CANARY – FI		ollow-up Date:			E6.37



## MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BUREAU OF ENVIRONMENTAL HEALTH SERVICES

FOOD ESTABLISHMENT INSPECTION REPORT

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ESTABLISHMENT NAME		ADDRESS		CITY/ZII	CITY /ZIP			
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODU	JCT/ LOCAT	TEMP. in ° F			
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIORITY elimination, prevention or reductiv /E IMMEDIATE ACTION within 7	on to an acceptable level, haza	ards associate	d with foodborne illness	Correct by (date)	Initial	
	or injury. These items wood receive		Z HOUI'S OF AS STATEM.					
Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	CORE IT , operational controls, facilities or 's). These items are to be corre	structures, equipment design,	general maint	enance or sanitation stated.	Correct by (date)	Initial	
							KB	
							KB	
							, ,	
		EDITICATION DROV	/IDED OR COMMENTS					
		LDOCATION PROV	VIDED ON CONNICENTS					
Person in Ch	arge /Title: \LessMhn	115			Date:			
Inspector:	Jaylor Brady		Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No	