

## 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	ECTION, OR SUCH SHORTER PER	OD OF TIME AS N	IAY BE	SPEC	IFIED I	N WRI	TING BY 1	THE REGU	ACILITIES WHICH MUST BE CORRE- ILATORY AUTHORITY. FAILURE TO			
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED ESTABLISHMENT NAME:		OWNER:				554110	DN OF YO		PERSON IN CHARGE:			
ADDRESS:					ABLIS	HMENT	NUMBER	R: COUNTY:	COUNTY:			
CITY/ZIP:	PHONE:	PHONE:			FAX:			P.H. PRIORITY : H	М	L		
ESTABLISHMENT TYPE BAKERY RESTAURANT	C. STORE CATERER SCHOOL SENIOR C		ELI MMER F	P.		GROCE	RY STOP		INSTITUTION MOBILE V TEMP.FOOD	ENDOR	S	
PURPOSE Pre-opening	Routine Follow-up	Complaint	Oth	er								
FROZEN DESSERT Approved Disapproved Not Applicable License No.			POSAL WATER SUF UBLIC COMMU RIVATE						MMUNITY PRIVATE mpled Results			
		RISK FAC	TORS	AND	INTE	RVEN	TIONS					
	preparation practices and employee reaks. Public health interventions								trol and Prevention as contributing fact	ors in		
Compliance	Demonstration of Kno	wledge	cos			mpliance			Potentially Hazardous Foods	COS	S R	
IN OUT	Person in charge present, demons and performs duties	strates knowledge,			IN OUT N/O N/A		Proper c					
	Employee Hea				IN (		N/O N/A		reheating procedures for hot holding			
IN OUT IN OUT	Management awareness; policy p Proper use of reporting, restriction				IN (		N/O N/A N/O N/A		ooling time and temperatures ot holding temperatures			
	Good Hygienic Prac	tices			IN	OUT	N/A	Proper c	old holding temperatures			
IN OUT N/O Proper eating, tasting, drinking c IN OUT N/O No discharge from eyes, nose al							<u>N/O N/A</u>		late marking and disposition a public health control (procedures /			
	Preventing Contamination	by Hands			IIN	001	N/O N/A	records)	Consumer Advisory			
IN OUT N/O	Hands clean and properly washed				IN	OUT	N/A		er advisory provided for raw or			
IN OUT N/O	No bare hand contact with ready-	o-eat foods or				underco			oked food Highly Susceptible Populations			
IN OUT	approved alternate method proper Adequate handwashing facilities s accessible				IN (				zed foods used, prohibited foods not			
	Approved Source	e						olleleu	ffered Chemical			
IN OUT Food obtained from approved source					Toxio				itives: approved and properly used			
IN OUT N/O N/A					IN OUT used			used				
IN OUT Food in good condition, safe and u IN OUT N/O N/A Required records available: shells destruction					IN				formance with Approved Procedures nce with approved Specialized Process	5		
	Protection from Contai	mination										
IN OUT N/A	Food separated and protected					letter tection.	o the left o	of each item	n indicates that item's status at the time	of the		
IN OUT N/A					IN = in compliance							
IN OUT N/O	N OUT N/O Proper disposition of returned, previous reconditioned, and unsafe food				N/A = not applicable COS=Corrected On Site				N/O = not observed R=Repeat Item			
			OOD RE									
IN OUT	Good Retail Practices are preventa Safe Food and Water	tive measures to co	COS	e introc R	IN	of path OUT	logens, ch		nd physical objects into foods. roper Use of Utensils	COS	R	
	eurized eggs used where required							utensils: pro	operly stored			
Wate	er and ice from approved source						Utensils		nt and linens: properly stored, dried,			
	Food Temperature Contro						Single-u	e-use/single-service articles: properly stored, used				
	quate equipment for temperature cont oved thawing methods used	rol			-		Gloves	used prope Utensil	erly s, Equipment and Vending		-	
	Thermometers provided and accurate							nd nonfood				
Food Identification								ned, constructed, and used washing facilities: installed, maintained, used; test				
Food properly labeled; original container								ood-contact surfaces clean				
Prevention of Food Contaminat							Hot and	Physical Facilities d cold water available; adequate pressure				
Insects, rodents, and animals not present Contamination prevented during food prep									; proper backflow devices	1	1	
and display Personal cleanliness: clean outer clothing, hai		, hair restraint,			+		Sewage	ge and wastewater properly disposed			+	
fingernails and jewelry Wiping cloths: properly used and stored							Toilet fa	et facilities: properly constructed, supplied, cleaned				
Fruits and vegetables washed before use							Garbag	Garbage/refuse properly disposed; facilities maintained Physical facilities installed, maintained, and clean			1	
Person in Charge /	Title:			1			Physica		nstalled, maintained, and clean	1	1	
					lau-l						1-	
Inspector:	paylor Brady			le	iepnoi	ne No.		F	Follow-up: Yes Follow-up Date:	N	No	
MO 580-1814 (9-13)		DISTRIBUTION: WHITE	- OWNER	S COPY	/		CANARY – F	ILE COPY			E6.37	



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ABCCCX	DOD ESTABLISHMENT IN		PAGE <sup>2</sup> of				
ESTABLISHMEN	NAME	ADDRESS		CITY /ZIP			
FOOD PRODUCT/LOCATION		TEMP. in ° F	LOCATION		TEMP. ir	۱°F	
Code		PRIORITY IT	FMS			Correct by	Initial
Reference	Priority items contribute directly to the or injury. These items MUST RECEI	e elimination, prevention or reduction VE IMMEDIATE ACTION within 72 I	to an acceptable level, hazards a hours or as stated.	associated with	foodborne illness	(date)	million
Code		CORE ITEI	MS			Correct by	Initial
Reference	Core items relate to general sanitatio standard operating procedures (SSO	n, operational controls, facilities or str	uctures, equipment design, gene	eral maintenance on or as stated	ce or sanitation d.	(date)	
		EDUCATION PROVID	DED OR COMMENTS				
Person in Ch	arge /Title:			Dat	e:		
Inspector:	Martin R Madii		Telephone No. EPI	HS No. Fol	low-up:	Yes	No
MO 580-1814 (9-13)		DISTRIBUTION: WHITE - OWNER'S COPY	CANARY – FILE COPY	Fol	low-up Date:		E6.37A