

TIME IN TIME OUT DATE PAGE 1 of

| WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS. PERSON IN CHARGE: ESTABLISHMENT NAME: OWNER: PERSON IN CHARGE: ADDRESS: ESTABLISHMENT NUMBER: COUNTY: CITY/ZIP: PHONE: FAX: P.H. PRIORITY : H M ESTABLISHMENT TYPE BAKERY C. STORE CATERER DELI GROCERY STORE INSTITUTION MOBILE VEND PURPOSE Pre-opening Routine Follow-up Complaint Other | |
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| CITY/ZIP: PHONE: FAX: P.H. PRIORITY : H M ESTABLISHMENT TYPE BAKERY RESTAURANT C. STORE SCHOOL CATERER ENDRO CENTER DELI SUMMER F.P. GROCERY STORE TAVERN INSTITUTION TEMP.FOOD MOBILE VENE MOBILE VENE TEMP.FOOD PURPOSE Pre-opening Routine Follow-up Complaint Other | DORS |
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| Approved Disapproved Not Applicable PUBLIC COMMUNITY NON-COMMUNITY PRIVATE License No. | 1 |
| RISK FACTORS AND INTERVENTIONS Risk factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public health interventions are control measures to prevent foodborne illness or injury. Compliance Potentially Hazardous Foods IN OUT Person in charge present, demonstrates knowledge, and performs duties IN OUT N/O N/A Proper cooking, time and temperature IN OUT Management awareness; policy present IN IN OUT N/O N/A Proper cooling time and temperatures IN OUT Proper use of reporting, restriction and exclusion IN IN OUT N/A Proper cooling time and temperatures IN OUT Proper use of reporting, restriction and exclusion IN IN OUT N/A Proper cooling time and temperatures IN OUT Proper use of reporting, restriction and exclusion IN IN OUT N/A Proper cooling time and temperatures IN OUT N/O Proper eating, tasting, drinking or tobacco use IN IN OUT N/A Proper date marking and disposition </td <td></td> | |
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| records) | |
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| IN OUT N/O Hands clean and properly washed IN OUT N/A Consumer advisory provided for raw or undercooked food | |
| IN OUT N/O No bare hand contact with ready-to-eat foods or approved alternate method properly followed Highly Susceptible Populations | |
| IN OUT Adequate handwashing facilities supplied & IN OUT N/O N/A Pasteurized foods used, prohibited foods not | |
| accessible INCOLUCATION offered Approved Source Chemical | |
| IN OUT Food obtained from approved source IN OUT N/A Food additives: approved and properly used | |
| IN OUT N/O N/A Food received at proper temperature IN OUT Toxic substances properly identified, stored and used | |
| IN OUT Food in good condition, safe and unadulterated Conformance with Approved Procedures N OUT Required records available: shellstock tags, parasite Compliance with approved Specialized Process | |
| IN OUT N/O N/A destruction IN OUT N/A and HACCP plan | |
| IN OUT N/A Food separated and protected The letter to the left of each item indicates that item's status at the time of t | he |
| inspection. | |
| IN OUT the Proper disposition of returned, previously served, N/A = not applicable N/O = not observed | |
| reconditioned, and unsafe food | |
| GOOD RETAIL PRACTICES Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods. | |
| IN OUT Safe Food and Water COS R IN OUT Proper Use of Utensils C | OS R |
| Pasteurized eggs used where required In-use utensils: properly stored Water and ice from approved source Utensils, equipment and linens: properly stored, dried, | |
| Food Temperature Control handled Single-use/single-service articles: properly stored, used | |
| Adequate equipment for temperature control Gloves used properly | |
| Approved thawing methods used Utensils, Equipment and Vending Thermometers provided and accurate Food and nonfood-contact surfaces cleanable, properly | <u> </u> |
| Best State Description designed, constructed, and used Food Identification Warewashing facilities: installed, maintained, used; test | |
| strips used | |
| Food properly labeled; original container Nonfood-contact surfaces clean Prevention of Food Contamination Physical Facilities | |
| Insects, rodents, and animals not present Hot and cold water available; adequate pressure | |
| Contamination prevented during food preparation, storage and display Plumbing installed; proper backflow devices | |
| Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry Sewage and wastewater properly disposed | |
| Wiping cloths: properly used and stored Toilet facilities: properly constructed, supplied, cleaned | |
| Fruits and vegetables washed before use Garbage/refuse properly disposed; facilities maintained Physical facilities installed, maintained, and clean Physical facilities installed, maintained | |
| Person in Charge /Title: Date: Date: | |
| Person in Charge /Title: Output Date: Inspector: Multime of Zerick Telephone No. EPHS No. Follow-up: Yes MO 580-1814 (9-13) DISTRIBUTION: WHITE - OWNER'S COPY CANARY - FILE COPY CANARY - FILE COPY | |
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