



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BUREAU OF ENVIRONMENTAL HEALTH SERVICES  
FOOD ESTABLISHMENT INSPECTION REPORT

TIME IN 11:15 am	TIME OUT 12:30 pm
DATE 01/10/2020	PAGE 1 of 3

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: <b>Dollar Tree #1319</b>	OWNER: <b>Dollar Tree, Inc.</b>	PERSON IN CHARGE: <b>Mario Reyes</b>
ADDRESS: <b>104 Perry Plaza</b>	ESTABLISHMENT NUMBER:	COUNTY: <b>Perry - 157</b>
CITY/ZIP: <b>Perryville, MO 63775</b>	PHONE: <b>573-547-0276</b>	FAX:
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY RESTAURANT <input type="checkbox"/> C. STORE SCHOOL <input type="checkbox"/> CATERER SENIOR CENTER <input type="checkbox"/> DELI SUMMER F.P. <input checked="" type="checkbox"/> GROCERY STORE TAVERN <input type="checkbox"/> INSTITUTION TEMP.FOOD <input type="checkbox"/> MOBILE VENDORS		P.H. PRIORITY : <input type="checkbox"/> H <input type="checkbox"/> M <input checked="" type="checkbox"/> L
PURPOSE <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____		
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input checked="" type="checkbox"/> Not Applicable License No. _____	SEWAGE DISPOSAL <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> PRIVATE Date Sampled _____    Results _____

**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	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
<input checked="" type="checkbox"/> OUT	Person in charge present, demonstrates knowledge, and performs duties			IN OUT N/O N/A	Proper cooking, time and temperature		
<b>Employee Health</b>							
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			IN OUT N/O N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			IN OUT N/O N/A	Proper cooling time and temperatures		
<b>Good Hygienic Practices</b>							
<input checked="" type="checkbox"/> OUT N/O	Proper eating, tasting, drinking or tobacco use			<input checked="" type="checkbox"/> IN OUT N/O N/A	Proper hot holding temperatures		
<input checked="" type="checkbox"/> OUT N/O	No discharge from eyes, nose and mouth			<input checked="" type="checkbox"/> IN OUT N/O N/A	Proper cold holding temperatures		
<b>Preventing Contamination by Hands</b>							
<input checked="" type="checkbox"/> OUT N/O	Hands clean and properly washed			IN OUT N/A	Proper date marking and disposition		
<input checked="" type="checkbox"/> OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Time as a public health control (procedures / records)		
<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			IN OUT N/O N/A	<b>Consumer Advisory</b>		
<b>Approved Source</b>							
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input checked="" type="checkbox"/> IN OUT N/A	<b>Chemical</b>		
IN OUT <input checked="" type="checkbox"/> N/A	Food received at proper temperature			<input checked="" type="checkbox"/> IN OUT	<b>Highly Susceptible Populations</b>		
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				<b>Pasteurized foods used, prohibited foods not offered</b>		
IN OUT N/O <input checked="" type="checkbox"/> N/A	Required records available: shellstock tags, parasite destruction			IN OUT N/A	<b>Chemical</b>		
<b>Protection from Contamination</b>							
<input checked="" type="checkbox"/> OUT N/A	Food separated and protected				<b>Food additives: approved and properly used</b>		
IN OUT <input checked="" type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized				<b>Toxic substances properly identified, stored and used</b>		
<input checked="" type="checkbox"/> OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food				<b>Conformance with Approved Procedures</b>		

The letter to the left of each item indicates that item's status at the time of the inspection.  
 IN = in compliance    OUT = not in compliance  
 N/A = not applicable    N/O = not observed  
 COS=Corrected On Site    R=Repeat Item

**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	COS	R
<input checked="" type="checkbox"/>		Pasteurized eggs used where required					In-use utensils: properly stored		
<input checked="" type="checkbox"/>		Water and ice from approved source			<input checked="" type="checkbox"/>		Utensils, equipment and linens: properly stored, dried, handled		
<b>Food Temperature Control</b>									
<input checked="" type="checkbox"/>		Adequate equipment for temperature control			<input checked="" type="checkbox"/>		Single-use/single-service articles: properly stored, used		
<input checked="" type="checkbox"/>		Approved thawing methods used			<input checked="" type="checkbox"/>		Gloves used properly		
	<input checked="" type="checkbox"/>	Thermometers provided and accurate			<input checked="" type="checkbox"/>		<b>Utensils, Equipment and Vending</b>		
<b>Food Identification</b>									
<input checked="" type="checkbox"/>		Food properly labeled; original container			<input checked="" type="checkbox"/>		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
<b>Prevention of Food Contamination</b>									
	<input checked="" type="checkbox"/>	Insects, rodents, and animals not present			<input checked="" type="checkbox"/>		Warewashing facilities: installed, maintained, used, test strips used		
<input checked="" type="checkbox"/>		Contamination prevented during food preparation, storage and display			<input checked="" type="checkbox"/>		Nonfood-contact surfaces clean		
<input checked="" type="checkbox"/>		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input checked="" type="checkbox"/>		<b>Physical Facilities</b>		
<input checked="" type="checkbox"/>		Wiping cloths: properly used and stored			<input checked="" type="checkbox"/>		Hot and cold water available; adequate pressure		
<input checked="" type="checkbox"/>		Fruits and vegetables washed before use			<input checked="" type="checkbox"/>		Plumbing installed; proper backflow devices		
					<input checked="" type="checkbox"/>		Sewage and wastewater properly disposed		
					<input checked="" type="checkbox"/>		Toilet facilities: properly constructed, supplied, cleaned		
					<input checked="" type="checkbox"/>		Garbage/refuse properly disposed; facilities maintained		
					<input checked="" type="checkbox"/>		Physical facilities installed, maintained, and clean		

Person in Charge /Title: <i>Mario Reyes</i>	Mario Reyes	Date: 01/10/2020
Inspector: <i>Melanie Zernicke</i>	Melanie Zernicke	Telephone No. 573-547-6564
	EPHS No. 1682	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Follow-up Date:



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ESTABLISHMENT NAME Dollar Tree #1319		ADDRESS 104 Perry Plaza		CITY /ZIP Perryville, MO 63775		
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F	
Zero zone 2-door cooler #5		35.6	Reach-in ice cream freezer		-16.0	
Zero zone 2-door freezer #4		-9.4	True Pepsi cooler		38.6	
Zero zone 2-door freezer #3		-6.8	True Coca Cola cooler		41.0	
Raw packaged pork / cold holding in Zero zone 2-door freezer #4		0.0	KPS walk-in cooler		38.1	
			KPS walk-in freezer			
Code Reference	<b>PRIORITY ITEMS</b> Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>				Correct by (date)	Initial
	No priority violations noted at this time.					
Code Reference	<b>CORE ITEMS</b> Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). <b>These items are to be corrected by the next regular inspection or as stated.</b>				Correct by (date)	Initial
6-501.12 (A)	Inspector observed packaging and dirt-like debris throughout isles and back storage area. Toilets in mens and womens restroom were also observed soiled. Physical facilities shall be cleaned as often as necessary to keep them clean.				01/15/20	
6-202.15 (A)	Inspector observed gaps underneath front entrance door and back receiving door. Outer openings of a food establishment shall be protected against the entry of insects and rodents by filling or closing holes and other gaps along floors, walls, and ceilings; closed, tight-fitting windows; and solid, self-closing, tight-fitting doors.				01/31/20	
4-204.112 (A)	Reach-in ice cream freezer was observed without an ambient thermometer. In a mechanically refrigerated or hot food storage unit, the sensor of a temperature measuring device shall be located to measure the air temperature or a simulated product temperature in the warmest part of a mechanically refrigerated unit and in the coolest part of a hot food storage unit.				01/15/20	
6-501.16	Inspector observed mop stored on floor and not properly allowed to air dry. After use, mops shall be placed in a position that allows them to air-dry without soiling walls, equipment, or supplies. COS: Inspector observed manager hang mop up over mop sink to properly air dry.				01/10/20	
6-304.11	Inspector observed ventilation fan in both mens and womens restrooms not functioning, and an odor is present in mens bathroom. If necessary to keep rooms free of excessive heat, steam, condensation, vapors, obnoxious odors, smoke, and fumes, mechanical ventilation of sufficient capacity shall be provided.				01/31/20	
<b>EDUCATION PROVIDED OR COMMENTS</b>						
Water for facility is supplied by the city of Perryville, MO. Pest control is conducted by Orkin. Inspector discussed employee illness/hygiene, cleaning non-food contact surfaces, rotation of stock, recalls, and cold holding temperatures.						
Person in Charge /Title: <i>Mario Reyes</i> <b>Mario Reyes</b>				Date: 01/10/2020		
Inspector: <i>Melanie Zernicke</i> <b>Melanie Zernicke</b>		Telephone No. 573-547-6564	EPHS No. 1682	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
				Follow-up Date:		



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Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
	Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>		
	No priority violations noted at this time.		

Code Reference	CORE ITEMS	Correct by (date)	Initial
	Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). <b>These items are to be corrected by the next regular inspection or as stated.</b>		
4-602.13	Inspector observed a dust-like debris in the bottom of True Pepsi cooler and True Coca Cola cooler. Walls on the inside of reach-in ice cream freezer are soiled with a build up of ice-like debris. Nonfood-contact surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues.	01/10/20	
6-501.11	Inspector observe damaged and missing ceiling tiles in back by mens and womens restrooms. Physical facilities shall be maintained in good repair.	01/31/20	

EDUCATION PROVIDED OR COMMENTS

Next routine inspection will be conducted in 18 months.

Person in Charge /Title: <i>Mario</i> Mario Reyes		Date: 01/10/2020	
Inspector: <i>Melanie Zernicke</i> Melanie Zernicke	Telephone No. 573-547-6564	EPHS No. 1682	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Follow-up Date:	