

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, OR SUCH SHORTER PE	RIOD OF TIME AS MA	AY BE SPI	ECIFIED	N WRIT	ING BY T	HE REG	ACILITIES WHICH MUST BE CORR ULATORY AUTHORITY. FAILURE 1			
ESTABLISHMENT N	OWNER:			SSATIO	N OF YOU		PERSON IN CHARGE:				
ADDRESS:		EST	ESTABLISHMENT NUMBER:			R: COUNTY:	COUNTY:				
CITY/ZIP:	PHONE:	PHONE:					P.H. PRIORITY : H	М	L		
ESTABLISHMENT TYPE BAKERY RESTAURANT	C. STORE CATERE SCHOOL SENIOR		I MER F.P.		GROCEF	RY STOR	E	INSTITUTION MOBILE TEMP.FOOD	VENDO	RS	
PURPOSE Pre-opening	Routine Follow-up	Complaint	Other								
FROZEN DESSERT SE Approved Disapproved Not Applicable License No		SEWAGE DISPOS/ PUBLIC PRIVA ⁻		TER SUPPLY COMMUNITY			NON-COMMUNITY PRIVATE Date Sampled Results				
License No.		RISK FACT			RVENT	IONS					
Risk factors are food p	preparation practices and employe	e behaviors most com	monly rep	orted to th	ne Cente	rs for Dis	ease Cor	ntrol and Prevention as contributing fa	ctors in		
toodborne illness outbre Compliance	eaks. Public health interventions Demonstration of Kr		cos to prever		ne Illnes: mpliance	s or injury	/.	Potentially Hazardous Foods	С	OS R	
IN OUT	Person in charge present, demo and performs duties	nstrates knowledge,		IN	OUT N	/O N/A	Proper	cooking, time and temperature			
	Employee Hea			IN		N/O N/A		reheating procedures for hot holding			
IN OUT IN OUT	Management awareness; policy Proper use of reporting, restriction			IN IN				roper cooling time and temperatures roper hot holding temperatures			
IN OUT N/O	Good Hygienic Prac			IN	OUT	N/A Proper c		cold holding temperatures			
IN OUT N/O	Proper eating, tasting, drinking on No discharge from eyes, nose a				<u>OUT N</u> OUT N			date marking and disposition s a public health control (procedures /			
	Preventing Contaminati	on by Hands		IIN		1/0 N/A	records) Consumer Advisory	_		
IN OUT N/O	Llanda alagn and preparly weahed			IN	OUT	N/A		ner advisory provided for raw or boked food			
IN OUT N/O No bare hand contact with ready-t							undered	Highly Susceptible Populations			
IN OUT	approved alternate method proper IN OUT Adequate handwashing facilities s accessible			IN			Pasteur offered	rized foods used, prohibited foods not			
	Approved Sou							Chemical			
	OUT Food obtained from approved sou				Тахіа			dditives: approved and properly used ubstances properly identified, stored a	and		
IN OUT N/O N/A				IN	used		used				
IN OUT	Food in good condition, safe and Required records available: she						Conformance with Approved Procedures Compliance with approved Specialized Process				
IN OUT N/O N/A	destruction Protection from Cont	0.71		IN			and HACCP plan				
IN OUT N/A	Food separated and protected	ammation		The	letter to	the left of	f each itei	m indicates that item's status at the ti	ne of the		
IN OUT N/A	Food-contact surfaces cleaned & sanitized			insp							
IN OUT NO Proper disposition of returned, previously serv					N/A =	n complia not appl	icable	OUT = not in compliance N/O = not observed			
	reconditioned, and unsafe food		OD RETA			=Correcte	ed On Site	e R=Repeat Item			
	Good Retail Practices are prevent					ogens, ch	emicals, a	and physical objects into foods.	-	-	
IN OUT	Safe Food and Water		COS F	r in	OUT			Proper Use of Utensils	COS	6 R	
	Pasteurized eggs used where required Water and ice from approved source							roperly stored ent and linens: properly stored, dried,			
	Food Torrespondence Operation				handled						
Adequ	Food Temperature Contro Adequate equipment for temperature contro						used prop	perly	1		
Approved thawing methods used								ils, Equipment and Vending			
Thermometers provided and accurate						designe	Food and nonfood-contact surfaces clean designed, constructed, and used				
					Warewa strips us	ewashing facilities: installed, maintained, used; test					
Food	nation				Nonfood	l-contact	surfaces clean				
Insect					Hot and	cold wate	Physical Facilities er available; adequate pressure				
Conta	eparation, storage		l			umbing installed; proper backflow devices					
and display Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry						Sewage	and was	tewater properly disposed			
tingeri Wiping					Toilet fa	pilet facilities: properly constructed, supplied, cleaned					
	Fruits and vegetables washed before use				Garbage/refuse properly disposed; facilities maintained						
Person in Charge /T	itle:		I			PHYSICal		installed, maintained, and clean Date:			
Inspector	Eilen (Mu	ine		Telepho		EDU	S No.	Follow-up: Yes		No	
Inspector: M	Inny Line			•				Follow-up: Yes Follow-up Date:		No	
MO 580-1814 (9-13)		DISTRIBUTION: WHITE -	OWNER'S C	OPY	C	CANARY – FI	LE COPY			E6.37	



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ESTABLISHMENT NAME ADDRESS							
FOOD PRODUCT/LOCATION		TEMP. in ° F	T/ LOCATI	ON	TEMP. ir	۱°F	
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIN	PRIORITY IT elimination, prevention or reduction /E IMMEDIATE ACTION within 72	FEMS to an acceptable level, hazard hours or as stated.	s associated	with foodborne illness	Correct by (date)	Initial
Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	n, operational controls, facilities or st	tructures, equipment design, ge	eneral mainte	enance or sanitation	Correct by (date)	Initial
	standard operating procedures (500)		ted by the next regular inspec		stated.		
			DED OR COMMENTS				
Person in Ch	arge /Title: Eilen M M. fannet Zuit	meller			Date:		
Inspector:	mint		Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No
MO 580-1814 (9-13)	- ummy and	DISTRIBUTION: WHITE - OWNER'S COP	Y CANARY – FILE COP	γ	. show up bate.		E6.37A