

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

| TIME IN | TIME OUT |
|---------|-----------|
| DATE | PAGE 1 of |

| | | CTION, OR SUCH SHORTER F FOR CORRECTIONS SPECIF | | | | | | | | | | FAILURE TO | COMPL | Y |
|---|---|--|--|----------------|--|--|-------------------|---|--|--|---|-----------------------------|----------|---------|
| ESTABLISH | ABLISHMENT NAME: OWNER: | | | | MINT NESSET IN SECONTION OF TOOM OF | | | | | PERSON IN CHARGE: | | | | |
| ADDRESS: | | | | | | ESTABLISHMENT NUMBER: | | | | ER: | COUNTY: | | | |
| CITY/ZIP: | CITY/ZIP: PHONE: | | | | | FAX: | | | | P.H. PRIORITY : | Н | М | L | |
| ESTABLISHMEN BAKERY RESTAU | | C. STORE CATEI SCHOOL SENIC | | ELI IMMER F | . D | | GROCE AVERN | RY STORE | Ē | | STITUTION MP.FOOD | MOBILE V | ENDOR: | S |
| PURPOSE Pre-open | | Routine Follow-up | | | | 1. | | N | | 1 51 | WIF.FOOD | | | |
| FROZEN DE | SSERT | <u> </u> | SEWAGE DISPO | | WAT | ER S | UPPL\ | | | | | | | |
| Approved License | | approved Not Applicable | PUBL PRIV | | C | COMM | 1UNIT` | Y | | | MUNITY pled | PRIVATE Results | | |
| LICCIO | | <u> </u> | RISK FAC | | AND | INTE | RVEN | TIONS | | | | | | |
| | | oreparation practices and emplo eaks. Public health intervention | | | | | | | | ontrol a | and Prevention as cor | ntributing fact | ors in | |
| Compliance | SS OULDI | Demonstration of | | COS | | | | | | Po | Potentially Hazardous Foods | | | S R |
| Person in charge present, demonstrate | | | • | | | IN (| OUT | N/O N/A | Prope | | ing, time and tempera | | | |
| 114 001 | | and performs duties Employee F | | | | IN (| | N/O N/A | Prone | er rehe | eating procedures for l | hot holding | | |
| IN OUT | | Management awareness; poli | | | | | | N/O N/A | | roper reheating procedures for hot holding roper cooling time and temperatures | | | | |
| IN OUT | | Proper use of reporting, restri | | | | - | | N/O N/A | | | olding temperatures | | | |
| IN OUT N/C |) | Good Hygienic Proper eating, tasting, drinking | | | | | <u>OUT</u> OUT | N/A N/O N/A | | | holding temperatures marking and dispositi | | _ | |
| IN OUT N/O | | No discharge from eyes, nose | | | | | | N/O N/A | | | ublic health control (pr | | | |
| 114 001 1470 | | Di Oti- | ation builtends | | | IIN ' | OUT | IN/O IN/A | recor | ds) | O Advi | | | |
| IN OUT NO | | Preventing Contamin Hands clean and properly was | | | | IN OUT N/A | | | Cons | Consumer Advisory Consumer advisory provided for raw or | | | | |
| IN OUT N/C | | No bare hand contact with rea | | | | IIN | 001 | undercoc | | | | | | |
| IN OUT N/C |) | approved alternate method pr | operly followed | | | | | | | | | | | |
| IN OUT Adequate handwashing facilities supplied accessible | | | | | | in OO1 N/O N/A offered | | | | foods used, prohibite | d foods not | | | |
| Approved Source | | | | | | | | | | | Chemical | | | |
| IN OUT N/ | Food obtained from approved source N/O N/A Food received at proper temperature | | | | | 1 | | N/A | Food Toxic | substa | res: approved and pro ances properly identific | perly used ed. stored an | d | |
| | O IN/A | | | | | IN | OUT | | used | | | | | |
| IN OUT Food in good condition, safe and unadul Required records available: shellstock ta | | | | | Compliano | | | | nance with Approved I with approved Specia | | 3 | | | |
| IN OUT N/ | O N/A | destruction | | | | IIN | 001 | N/A | | HACCP | | | | |
| IN OUT | Protection from Contamination IN OUT N/A Food separated and protected | | | | | The | letter to | o the left of | each i | tem inc | dicates that item's stat | tus at the time | of the | |
| IN OUT | N/A Food-contact surfaces cleaned & sanitized | | | | inspection. IN = in compliance OUT = not in compliance | | | | | | | | | |
| IN OUT N/O Proper disposition of returned, previously served, | | | | | N/A = not applicable N/O = not observed | | | | | | | | | |
| 114 001 14/0 | , | reconditioned, and unsafe foo | | OOD RE | ΤΔΙΙ Ε | PRACT | | S=Corrected | d On S | ite | R=Repeat Item | | | |
| | | Good Retail Practices are prev | | | | | | nogens, che | emicals | s, and p | ohysical objects into fo | oods. | | |
| IN OUT | | Safe Food and Water | | | R | IN | OUT | | Proper Use of Utensils | | | | cos | R |
| | Pasteurized eggs used where red Water and ice from approved sou | | d | | | | | | utensils: properly stored ls, equipment and linens: properly stored, dried, ed -use/single-service articles: properly stored, used | | | | | |
| | | Food Temperature Co | ontrol | | | | | handled Single-us | | | | | 1 | 1 |
| | Adequ | uate equipment for temperature | | | | | | Gloves u | sed pr | operly | ' ' ' | • | | |
| | | ved thawing methods used | | | | | | F | | | quipment and Vendin | | | |
| | Inerm | nometers provided and accurate |) | | | | | | nd nonfood-contact surfaces cleanable, properled, constructed, and used | | | oie, properiy | | |
| | | Food Identification | | | | | | Warewas | rewashing facilities: installed, maintained, used; te | | | d, used; test | | |
| | Food | properly labeled; original contain | roperly labeled; original container No | | | | ct surfa | ices clean | | | | | | |
| | | Prevention of Food Contamination | | | | | | 11.11 | | | ysical Facilities | | | |
| | | ets, rodents, and animals not present amination prevented during food preparation, storage | | | | | | | | | ailable; adequate pres oper backflow devices | | - | 1- |
| | and di | display | | | | | | · · | | | · | | | <u></u> |
| | | onal cleanliness: clean outer clothing, hair restraint, | | | | | | Sewage | age and wastewater properly disposed | | | | | |
| | Wiping | ing cloths: properly used and stored | | | | Toilet facilities: properly constructed, supplied, cleaned | | | | | | | | |
| | | and vegetables washed before | | | | | | Garbage/refuse properly disposed; facilities maintained Physical facilities installed, maintained, and clean | | | | | 1 | |
| Person in Ch | arge /T | itle: // (/ / | | | | I | | Priysical | iacilitie | Date | | ciean | | 1 |
| | | I TI NIN V NOVO | | | Tal | lonha | ne No. | EPHS | 2 No | Eall- | ow-up: | Yes | . | Jo |
| Inspector: | Zil | itle: Nim Vim — Jayla Biady | | | | | | | | Follo | ow-up: ow-up Date: | 168 | | VО |
| MO 580-1814 (9-13) | | 11 | DISTRIBUTION: WHITE | E – OWNER' | S COPY | | | CANARY - FIL | E COPY | | | | | E6.37 |

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE



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 | | | |
|--------------------|--|--|--|----------------|------------------------------|-------------------|---------|--|
| FO | OD PRODUCT/LOCATION | TEMP. in ° F | FOOD PRODU | JCT/ LOCAT | TION | TEMP. in ° F | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Code | | PRIORITY | ITEMS | | | Correct by | Initial | |
| Reference | Priority items contribute directly to the or injury. These items MUST RECEIV | elimination, prevention or reduction E IMMEDIATE ACTION within 7 | on to an acceptable level, haza 2 hours or as stated. | ards associate | d with foodborne illness | (date) | | |
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| Code Reference | Core items relate to general sanitation standard operating procedures (SSOP | 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 | |
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| | | EDUCATION PROV | IDED OR COMMENTS | | | | | |
| | | | | | | | | |
| Person in Ch | rarge /Title: | , | | | Date: | | | |
| Inspector: | arge /Title: Min Winn Zel Jayla Bindi, | | Telephone No. | EPHS No. | Follow-up: | Yes | No | |
| Inspector: | - Jayra Durdy | | | | Follow-up Date: | | - | |