

### 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 INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SI WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESIDENT NAME:  OWNER:															
ADDRESS:				EST	ABLIS	HMENT	NUMBE	ER:	COUNTY:						
CITY/Z	ZIP:			PHONE:			FAX:					P.H. PRIORITY :	Н	М	L
B	ISHMENT AKERY		C. STORE CATE			- <sub>D</sub>			RY STOR	E		TITUTION	MOBILE V	ENDOR	S
PURPOS	ESTAUF SE re-openi		SCHOOL SENIC  Routine Follow-up		MMER F	er		AVERN			I EIVI	IP.FOOD			
	EN DES		approved Not Applicable	SEWAGE DISPOS				JPPLY		NON (	COMM	ALINITY	PRIVATE		
	License		пот Арріїсавіе	PUBL PRIVA			COMMUNITY NON-CO Date S					led	Results .		
			•	RISK FAC	CTORS	AND	INTE	RVENT	TIONS						
			reparation practices and emplo								ontrol ar	nd Prevention as cor	tributing facto	rs in	
Compliar		o outb.	Demonstration of		COS			npliance			Pot	entially Hazardous F	oods	COS	S R
IN OL	JT		Person in charge present, der and performs duties				IN (	1 TUC	N/O N/A	Proper		ng, time and tempera		_	
			Employee H				IN (		N/O N/A	Proper	r rehea	ating procedures for I	not holding		
IN O			Management awareness; poli						N/O N/A			g time and temperat	ures		
IN O	JT		Proper use of reporting, restriction Good Hygienic				IN (		N/O N/A N/A			olding temperatures olding temperatures			
IN OL	JT N/O	1	Proper eating, tasting, drinking					<u>OUT</u> OUT	N/O N/A			narking and dispositi	on	_	
	JT N/O	)	No discharge from eyes, nose						N/O N/A		as a pul	blic health control (pr			
			Preventing Contamin	ation by Hands						record	15)	Consumer Advisory	1		
IN O	JT N/O		Hands clean and properly was				IN	OUT	N/A			visory provided for r			
IN O	JT N/O	)	No bare hand contact with ready-to-eat foods or approved alternate method properly followed						undercooked food Highly Susceptible Populations			ations			
IN O	JT		Adequate handwashing facilit accessible				IN (	1 TUC	N/O N/A	Paster		oods used, prohibite	d foods not	_	
			Approved S	ource						Officied	u	Chemical			
IN OL	JT		Food obtained from approved				IN	OUT	N/A			s: approved and pro			
IN OUT N/O N/A Food received at proper temperature					IN (	OUT		Toxic s	substar	nces properly identific	ed, stored and	i T			
IN OU	JT		Food in good condition, safe a	and unadulterated							onforma	ance with Approved I	Procedures		
Required records available: shellstock tags, parasite					IN	OUT	N/A	Compl		vith approved Specia					
			destruction Protection from Co	ontamination						anu ni	ACCF	Diaii			
IN OL	JT	N/A	Food separated and protected	t					the left o	f each ite	em indi	cates that item's stat	us at the time	of the	
IN OL	JT	N/A	Food-contact surfaces cleane	d & sanitized			insp	ection. IN =	in complia	nce	(	OUT = not in complia	nce		
IN O	UT N/O	)	Proper disposition of returned					N/A	A = not applicable N/O = not observed PS=Corrected On Site R=Repeat Item						
0	0. 14/0		reconditioned, and unsafe foo		00D DE	-T A II   F			=Correcte	d On Sil	ile i	R=Repeat item			
			Good Retail Practices are prev		OOD RE				ogens ch	emicals	and nh	ovsical objects into fo	onds		
IN	OUT		Safe Food and Wa		COS	R	IN	OUT	ogens, en	cimcais,		Use of Utensils	, , , , , , , , , , , , , , , , , , ,	cos	R
		Paste	urized eggs used where require						In-use u	tensils: r				1	
		Water	and ice from approved source								nent and	d linens: properly sto	red, dried,		
			Food Temperature Co	ontrol					handled		la_con#	ce articles: properly	etored used	<del>                                     </del>	
		Adequ	ate equipment for temperature						Gloves			be articles, properly s	storeu, useu	1	
			ved thawing methods used							Uten	sils, Eq	uipment and Vendin	g		
		Therm	ometers provided and accurate	1								act surfaces cleanab	ole, properly		
			Food Identification	n								and used installed, maintained	l ricad: tact	<u> </u>	
									strips us	ed		·	1, 4304, 1031		
		Food	oroperly labeled; original contain						Nonfood	l-contact		es clean		<u> </u>	
		Insect	Prevention of Food Conta s, rodents, and animals not pre-						Hot and	cold wa		sical Facilities	SUITE	<del></del>	1
			tamination prevented during food preparation, storage							Hot and cold water available; adequate pressure Plumbing installed; proper backflow devices					
		and di										er properly disposed		<u> </u>	1
		fingerr	nails and jewelry						Ū						
		Wiping	cloths: properly used and store									constructed, supplie			
		Fruits	and vegetables washed before	use								y disposed; facilities		<del>                                     </del>	-
Person	n in Cha	arge /T	itle:						rnysica	iaciiities	s install Date:	led, maintained, and	UEAII		1
			muht Mah	<u> </u>											
Inspec	tor: Z	lavar	L Warkey &			Tel	ephor	ne No.	PHE	S No.	Follov	w-up: w-up Date:	Yes	N	Ю
MO 580-1	814 (9-13)	1	<del>,                                    </del>	DISTRIBUTION: WHITE	- OWNER	'S COPY			CANARY - F	LE 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



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ESTABLISHMEN'	TNAME	ADDRESS		CITY /ZIF	CITY/ZIP			
FOO	OD PRODUCT/LOCATION	TEMP. in ° F	TON	TEMP. i	n ° F			
Code Reference	Priority items contribute directly to the e or injury. <b>These items MUST RECEIV</b>	elimination prevention or re	RITY ITEMS Eduction to an acceptable level, haza thin 72 hours or as stated.	rds associate	d with foodborne illness	Correct by (date)	Initial	
							MN	
							MN	
							/M 1/	
							$\mathcal{M}\mathcal{N}$	
							MN	
Code Reference	Core items relate to general sanitation, standard operating procedures (SSOPs	operational controls, faciliti	RE ITEMS ies or structures, equipment design, corrected by the next regular insp	general maint	enance or sanitation stated.	Correct by (date)	Initial	
		,	<u> </u>				M	
							MN	
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							MN	
							M	
		EDUCATION F	PROVIDED OR COMMENTS					
Person in Ch	narge /Title:   M.I. + M.L.				Date:			
Inspector:	Peagen & Markey &	DISTRIBUTION: WHITE – OWN	Telephone No.	PHES No.	Follow-up: Follow-up Date:	Yes	No E6.37A	



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FOO	OD PRODUCT/LOCATION	TEMP. in ° F	TEMP. in ° F FOOD PRODUCT/ LOCATION					
Code		DDI	ORITY ITEMS			Correct by	Initial	
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Code Reference	Core items relate to general sanitation, standard operating procedures (SSOPs	operational controls, facili	ORE ITEMS ities or structures, equipment design, ecorrected by the next regular insp	general maint	enance or sanitation	Correct by (date)	Initial	
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		EDITORI	PROVIDED OR COMMENTS					
			FROVIDED OR COMMENTS					
Person in Ch	narge /Title: ///////////	(eh_			Date:			
Inspector:	large /Title: Mwwt M Peagant Markey &	- DISTRIBUTION: WHITE – OWI	Telephone No.	PHES No.	Follow-up: Follow-up Date:	Yes	No E6.37A	



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FOOD ESTABLISHMENT INSPECTION REPORT

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ESTABLISHMENT NAME		ADDRESS			CITY/ZII	CITY/ZIP			
FO	OD PRODUCT/LOCATION	TEMP. in ° F	TEMP. in ° F FOOD PRODUCT/			TION	TEMP. in ° F		
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIOR elimination, prevention or reduce E IMMEDIATE ACTION with	ITY ITEMS uction to an acce in 72 hours or a	ptable level, haza s stated.	rds associate	d with foodborne illness	Correct by (date)	Initial	
Code Reference	Core items relate to general sanitation standard operating procedures (SSOP	COR, operational controls, facilities	E ITEMS s or structures, e	quipment design,	general maint	enance or sanitation	Correct by (date)	Initial	
		EDUCATION PF	ROVIDED OR (	COMMENTS					
	<u> </u>								
Person in Ch	arge /Title: MW Me					Date:			
Inspector:	leagant Markay &	DISTRIBITION: WHITE _ OWNER		elephone No.	PHES No.	Follow-up: Follow-up Date:	Yes	No E6 374	