

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 SPE	CIFIED	N WRIT	TING BY 1	THE REGU	ACILITIES WHICH MUST BE CORRECT JLATORY AUTHORITY. FAILURE TO		
ESTABLISHMENT	OWNER:	IN THIS NOTICE MAY RESULT IN CESS OWNER:			N OF TO		PERSON IN CHARGE:			
ADDRESS:		EST	ESTABLISHMENT NUMBER:			COUNTY:				
CITY/ZIP:	PHONE:	PHONE:					P.H. PRIORITY : H	М	L	
			l MER F.P.		GROCE	RY STOR	INSTITUTION MOBILE V TEMP.FOOD	ENDOR	(S	
PURPOSE Pre-opening	Routine Follow-up	Complaint	Other							
FROZEN DESSERT Approved Dis	PUBLIC	WAGE DISPOSAL WATER SUPPLY PUBLIC COMMUNITY PRIVATE				NON-CO Date S				
		RISK FAC		D INTE	RVENT	TIONS				
Risk factors are food p	preparation practices and employe	e behaviors most com	monly repo	rted to the	ne Cente	ers for Dis	ease Con	trol and Prevention as contributing factor	ors in	
Compliance	eaks. Public health interventions Demonstration of Kr				me illnes		/. 	Potentially Hazardous Foods	CO	S R
IN OUT	T Person in charge present, demon and performs duties			IN	IN OUT N/		Proper of	cooking, time and temperature		
IN1	Employee Hea					N/O N/A		reheating procedures for hot holding		
IN OUT IN OUT	Management awareness; policy Proper use of reporting, restriction							cooling time and temperatures		
IN OUT N/O	Good Hygienic Pr	actices		IN	OUT	N/A	Proper of	cold holding temperatures		
IN OUT N/O	Proper eating, tasting, drinking of No discharge from eyes, nose a				OUT I	<u>N/O N/A</u> N/O N/A		date marking and disposition a public health control (procedures /		
	Preventing Contaminati	on by Hands		IIN		N/U N/A	records)	Consumer Advisory	_	
IN OUT N/O	Llanda alaan and properly weeked			IN	OUT	N/A		her advisory provided for raw or oked food		
IN OUT N/O	IN OUT N/O No bare hand contact with ready-t							Highly Susceptible Populations		
IN OUT	IN OUT Adequate handwashing facilities s			IN			Pasteuri offered	ized foods used, prohibited foods not		
accessible Approved Source		rce			ollered		Unered	Chemical		
	OUT Food obtained from approved sour				Toxia a			ditives: approved and properly used ubstances properly identified, stored and	4	
IN OUT N/O N/A				IN			used		4	
IN OUT	Food in good condition, safe and							Conformance with Approved Procedures Compliance with approved Specialized Process		
IN OUT N/O N/A	Required records available: shellstock tags, parasite destruction			IN				and HACCP plan		
IN OUT N/A	Protection from Contamination Food separated and protected			The	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 appl	N/O = not observed			
	reconditioned, and unsafe food		OD RETAII	PRACI		=Conecte	ed On Site	R=Repeat Item		
	Good Retail Practices are preven					ogens, ch	emicals, a	ind physical objects into foods.		
IN OUT	Safe Food and Water urized eggs used where required		COS R	IN	OUT			Proper Use of Utensils operly stored	COS	R
	r and ice from approved source				Utensils			nt and linens: properly stored, dried,		+
	Food Temperature Contro			_	handled			d use/single-service articles: properly stored, used		
Adequ	uate equipment for temperature co						used prope	erly		
Appro Thern			_		Food or	Utensils, Equipment and Vending				
Inem					designe	and nonfood-contact surfaces cleanable, properly ned, constructed, and used				
Food Identification						Warewa strips us		lities: installed, maintained, used; test		
Food properly labeled; original container						Nonfood	ood-contact surfaces clean			_
Insect	Prevention of Food Contamination					Hot and	cold wate	Physical Facilities r available; adequate pressure		+
Conta	eparation, storage					mbing installed; proper backflow devices				
Perso	and display Personal cleanliness: clean outer clothing, hair restraint,					Sewage	and wast	ewater properly disposed		
fingernails and jewelry Wiping cloths: properly used and stored						Toilet fa	Toilet facilities: properly constructed, supplied, cleaned			
	Fruits and vegetables washed before use					Garbage/refuse properly disposed; facilities maintained				1
Person in Charge /1				1		Physica		installed, maintained, and clean Date:		
) WILL VEV			olont	00 N-		0.1-			Na
Inspector: Peagan J. Mac	Kay Lately Reaut	V		elepho			F	Follow-up: Yes Follow-up Date:		No
MO 580-1814 (9-13)		DISTRIBUTION: WHITE -	OWNER'S CO	PY		CANARY - F	ILE COPY			E6.37



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						AGE ² of		
ESTABLISHMEN	TNAME	ADDRESS	CITY/ZIP	CITY /ZIP				
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT	FOOD PRODUCT/ LOCATION			n ° F	
Code		PRIORITY IT	EMS			Correct by	Initial	
Reference	Priority items contribute directly to the or injury. These items MUST RECEI	e elimination, prevention or reduction VE IMMEDIATE ACTION within 72	to an acceptable level, hazards hours or as stated.	associated with	foodborne illness	(date)		
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Code Reference	Core items relate to general sanitatio standard operating procedures (SSO	CORE ITEI n, operational controls, facilities or st Ps) These items are to be correct	ructures, equipment design, gen	eral maintenanc	e or sanitation	Correct by (date)	Initial	
							59	
							ST	
							CΥ	
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		EDUCATION PROVID	DED OR COMMENTS					
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Person in Ch	Swith y	oung)	· · · · · · · · · · · · · · · · · · ·	Dat				
Inspector: Pear				Foll	ow-up: ow-up Date:	Yes	No	
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