

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

TIME IN	TIME OUT				
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NEXT ROL	JTINE	INSPEC	CTION, OR SUCH SHORTER F	PERIOD OF TIME AS N	ИAY BE	SPEC	IFIED	IN WRI	TING BY	THE REG	ULA	LITIES WHICH MUST BE CORRECTORY AUTHORITY. FAILURE TO			
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIE ESTABLISHMENT NAME:			OWNER:					UR FUUI	D OP	PERATIONS.  PERSON IN CHARGE:					
ADDRESS:								ESTABLISHMENT NUMBER:				COUNTY:			
CITY/ZIP:				PHONE:	PHONE:			FAX:				P.H. PRIORITY : H	М	L	
	HMENT (ERY STAUF		C. STORE CATER SCHOOL SENIC		ELI MMER F	=.P.		GROCE AVERI	ERY STOF	RE		STITUTION MOBILE V	ENDOR	S	
PURPOSE Pre-	openii	ng	Routine Follow-up	Complaint	Oth	er									
FROZEN Approv			approved Not Applicable		SEWAGE DISPOSAL WATER SUPPLY PUBLIC COMMUNITY						MUNITY PRIVATE				
Li	icense	No		PRIVA	ATE					Date S	Sam	pled Results			
				RISK FAC											
			reparation practices and emplo eaks. Public health intervention								ntrol	and Prevention as contributing factor	ors in		
Compliance		o outbre	Demonstration of		COS			mplianc		, . [	Po	otentially Hazardous Foods	CO	S R	
IN OUT	-		Person in charge present, der	nonstrates knowledge,			IN OUT I		N/O N/A	Dropor cooking time and temperature		ing, time and temperature			
	and performs duti		and performs duties  Employee F	lealth					N/O N/A						
IN OUT	Γ		Management awareness; poli	cy present					N/O N/A	Proper	cooli	ng time and temperatures			
IN OUT	Γ		Proper use of reporting, restriction Good Hygienic						N/O N/A			holding temperatures holding temperatures			
IN OUT	N/O		Proper eating, tasting, drinking			+		OUT	N/O N/A			marking and disposition			
IN OUT	N/O		No discharge from eyes, nose	and mouth			IN		N/O N/A			ublic health control (procedures /			
			Preventing Contamin	ation by Hands			1			records	S)	Consumer Advisory			
IN OUT	Hands clean and properly was					IN	OUT	N/A			dvisory provided for raw or				
			No bare hand contact with rea	dy-to-eat foods or			+			underc		thly Susceptible Populations			
approved alternate method pr		operly followed													
IN OUT	accessible					IN	OUT	N/O N/A Pasteurize offered			foods used, prohibited foods not				
IN OUT	-		Approved S Food obtained from approved				INI	OUT	N/A	Food a	dditiv	Chemical res: approved and properly used			
			Food received at proper temperature				1				ances properly identified, stored and	I			
IN OUT	_		Food in good condition, safe and unadulterated								Conformance with Approved Procedures				
IN OUT	IN OUT N/O N/A Required records available: sh destruction				IN OUT		N/A	I/A Compliance with approved Specialized Proces and HACCP plan							
IN OUT			Protection from Co				The	lottor t	to the left o	of each ite	m in	dicates that item's status at the time	of the		
IN OUT		N/A	<u> </u>					inspection.				dicates that item's status at the time	OI IIIE		
IN OUT	IN OUT N/A Food-contact surfaces cleaned						IN = in compliance N/A = not applicable								
IN OUT	IN OUT N/O Proper disposition of returned reconditioned, and unsafe for		reconditioned, and unsafe foo				COS=Correcte			ted On Site R=Repeat Item					
			Occid Detail Desetions are arrest		OOD RE							horizal abia da inda fa a da			
IN (	TUC		Good Retail Practices are prevenues Safe Food and Wa		COS	R	IN	OUT	nogens, cr			er Use of Utensils	COS	R	
		Pasteurized eggs used where require		d						se utensils: properly stored					
		Water	and ice from approved source						handled	ils, equipment and linens: properly stored, dried,					
			Food Temperature Co						Single-u	use/single		rice articles: properly stored, used			
			ate equipment for temperature ved thawing methods used	control		+	_	+	Gloves	es used properly Utensils, Equipment and Vending		guinment and Vending			
			ometers provided and accurate						Food ar			ntact surfaces cleanable, properly			
			Food Identification				+					l, and used s: installed, maintained, used; test			
			i ood identiiicatioi	1						trips used lonfood-contact surfa		s. Ilistalieu, maintaineu, useu, test			
		Food p	properly labeled; original contain						Nonfood						
		Prevention of Food Contar Insects, rodents, and animals not pres							Hot and	cold wat		ysical Facilities ailable; adequate pressure			
	Contamination prevented during food pand display  Personal cleanliness: clean outer cloth fingernails and jewelry								lumbing installed; proper						
$\vdash$			ning hair restraint			+		Sewage			ter properly disposed				
									, .						
$\vdash$		Wiping	cloths: properly used and store and vegetables washed before	ed			+		Toilet fa	cilities: p	roper	ly constructed, supplied, cleaned rly disposed; facilities maintained			
			(									alled, maintained, and clean		$\pm$	
Person i	in Cha	arge /T	itle: Chush Sania								Date	9:			
Inspecto	or: //	uni (11	Astro			Те	lepho	ne No	. PHE			ow-up: Yes	ı	No	



## MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BUREAU OF ENVIRONMENTAL HEALTH SERVICES

FOOD ESTABLISHMENT INSPECTION REPORT

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ESTABLISHMENT NAME		ADDRESS		CITY/ZI	CITY/ZIP			
FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODU	ICT/ LOCAT	/ LOCATION		ı°F	
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIORITY I e elimination, prevention or reduction VE IMMEDIATE ACTION within 72	TEMS  n to an acceptable level, haza l hours or as stated.	rds associate	d with foodborne illness	Correct by (date)	Initial	
Code Reference	Core items relate to general sanitation	CORE ITE	tructures, equipment design,	general main	tenance or sanitation	Correct by (date)	Initial	
	standard operating procedures (SSOI	Ps). These items are to be correct	ted by the next regular insp	ection or as	stated.		10	
							B	
							حق	
		EDITION DDOM	DED OR COMMENTS					
		EDUCATION PROVI	DED OK COMMENTS					
	(							
	Title: 0 4 1				Date:			
Person in Ch	narge /Title: Chush Sien							
Person in Ch	Turn Wally	ie i	Telephone No.	PHES No.	Follow-up: Follow-up Date:	Yes	No	