

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 SPECI WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT ESTABLISHMENT NAME: OWNER:						ECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY LT IN CESSATION OF YOUR FOOD OPERATIONS. PERSON IN CHARGE:						Y		
ADDRESS:				ı	ESTABLISHMENT NUMBER:				ER:	COUNTY:				
CITY/ZIP:			PHONE:		F	FAX:					P.H. PRIORITY :	Н	М	L
ESTABLISHMENT TYPE BAKERY C. STORE CATERER DELI RESTAURANT SCHOOL SENIOR CENTER SUMMER F.P.			·.		ROCE	RY STOR	E		STITUTION MP.FOOD	MOBILE V	ENDOR	S		
PURPOSE Pre-openi		Routine Follow-up		Other										
FROZEN DE		approved Not Applicable	SEWAGE DISPOS	_			JPPLY		NON-	-COM	MUNITY	PRIVATE		
License	e No		PRIV	ATE					Date	Sam	pled	Results		
			RISK FAC											
		preparation practices and emplo eaks. Public health intervention								ontrol	and Prevention as cor	ntributing facto	ors in	
Compliance	00 001.01	Demonstration of		COS	R		npliance		•	P	otentially Hazardous F	oods	CO	S R
IN OUT		Person in charge present demonstrates knowledge				N/O N/A								
IN OUT		Employee F Management awareness; poli						N/O N/A						
IN OUT		Proper use of reporting, restri	ction and exclusion		_	IN (N/O N/A N/A	Proper hot holding temperatures					
IN OUT N/C)	Proper eating, tasting, drinkin	g or tobacco use					N/O N/A	Prope	er date	marking and dispositi	ion		
IN OUT N/C)	No discharge from eyes, nose				IN OUT N/O N/A				Time as a public health control (procedures / records)				
IN OUT N/C)	Preventing Contamin Hands clean and properly was									Consumer Advisory er advisory provided for raw or ked food			
IN OUT N/C)	No bare hand contact with ready-to-eat foods or approved alternate method properly followed							Highly Susceptible Populations			lations		
IN OUT Adequate handwashing facilities supplied & accessible						IN OUT N/O N/A Pasteurized fo offered			d foods used, prohibited foods not					
IN OUT		Approved S Food obtained from approved				INI (Chemical IN OUT N/A Food additives: approved and properly used				nerly used			
IN OUT N/O N/A Food received at proper temperature					IN (IN/A	Toxic substances properly identified, stored a used				t		
IN OUT Food in good condition, safe and unadulterated Required records available: shellstock tags, participations.						IN	OUT	Compliance with Approved Procedures N/A Compliance with approved Specialized Proces				3		
114 001 14/0	J IN/A	destruction Protection from Co	ontamination		┞			IV/A	and F	ACCF	P plan			
IN OUT	N/A	Food separated and protected				The	letter to	the left of	each i	tem in	dicates that item's sta	tus at the time	of the	
IN OUT N/A Food-contact surfaces cleaned & sanitized					inspection. IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed									
IN OUT N/O Proper disposition of returned, previously served, reconditioned, and unsafe food							COS	= not appii =Correcte		ite	R=Repeat Item			
		Good Retail Practices are prev		OOD RETA				ogono oh	micolo	and	abusical abiasta into f	anda		
IN OUT		Safe Food and Wa			R	IN	OUT	logens, che	illicais		er Use of Utensils	J0us.	COS	R
Pasteurized eggs used where required Water and ice from approved source		d			In-use utensils: properly stored Utensils, equipment and linens: properly stored, handled				ored, dried,					
		Food Temperature Co						Single-u			vice articles: properly	stored, used		
		ate equipment for temperature	control					Gloves u			Tautismost and Mandin	~		
		proved thawing methods used ermometers provided and accurate							Utensils, Equipment and Vending nod and nonfood-contact surfaces cleanable, properly esigned, constructed, and used					
		Food Identificatio	n						shing f		s: installed, maintaine	d, used; test		
	Food	properly labeled; original contai	ner								aces clean			
		Prevention of Food Conta						11.1	1.1		ysical Facilities			
		Insects, rodents, and animals not present Contamination prevented during food preparation, storage				Hot and cold water available; adequate pressure Plumbing installed; proper backflow devices								
	and display Personal cleanliness: clean outer clothing, hair restraint,				-			,	ewage and wastewater properly disposed					
fingernails and jewelry				_						1				
	Wiping cloths: properly used and stored Fruits and vegetables washed before use					Toilet facilities: properly constructed, supplied, cleaned Garbage/refuse properly disposed; facilities maintained								
		-								es insta	alled, maintained, and			
Person in Ch	arge /T	itle: Leth ZInel	'							Date	e:			
Inspector:	100	von Bradis			Tele	phor	ne No.	EPH	S No.		ow-up: ow-up Date:	Yes	١	No
MO 580-1814 (9-13)	<u> </u>	m C V / www /	DISTRIBUTION: WHITE	- OWNER'S C	COPY			CANARY – FII	LE COPY		о ар ваю.			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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					CITY /ZIP			
FOC	DD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODU	CT/ LOCAT	ION	TEMD in	TEMP. in ° F	
	TOOD TROBUSTIC CONTROL OF TRO						TEMP.III F	
Code		PRIORITY I	TEMS			Correct by	Initial	
Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	elimination, prevention or reduction E IMMEDIATE ACTION within 72	n to an acceptable level, hazar	rds associate	d with foodborne illness	(date)		
Code	Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.							
Reference	Core items relate to general sanitation standard operating procedures (SSOF	CORE ITE , operational controls, facilities or s s) These items are to be correct	structures, equipment design, o	general maint	enance or sanitation	Correct by (date)	Initial	
EDUCATION PROVIDED OR COMMENTS								
Person in Charge /Title: Leth 74 gred Inspector: Jaulor Brady Telephone No. EPHS No. Follow-up: Follow-up Date:								
Inspector:	Taylor Brady	DISTRIBUTION: WHITE - OWNER'S CO	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No E6.37A	



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ESTABLISHMEN'	T NAME	ADDRESS		CITY /ZIF	CITY /ZIP			
FOO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODU	ICT/ LOCAT	TION	TEMP. in ° F		
Code Reference	Priority items contribute directly to the e or injury. These items MUST RECEIVE	limination, prevention or r	ORITY ITEMS eduction to an acceptable level, haza ithin 72 hours or as stated.	rds associated	d with foodborne illness	Correct by (date)	Initial	
Code Reference	Core items relate to general sanitation, standard operating procedures (SSOPs	operational controls, facili	ORE ITEMS ties or structures, equipment design, corrected by the next regular insp	general maint	enance or sanitation stated.	Correct by (date)	Initial	
			PROVIDED OR COMMENTS					
		EDUCATION	PROVIDED OR COMMENTS					
Person in Ch	narge /Title: Luch 74a	rel			Date:			
Inspector: MO 580-1814 (9-13)	Jaylor Brady	DISTRIBUTION: WHITE - OW	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No E6.37A	