

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 PER	RIOD OF TIME AS M	IAY BE S	SPECI	FIED I	N WRIT	TING BY T	THE REGUL	CILITIES WHICH MUST BE CORRE ATORY AUTHORITY. FAILURE TO			
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED ESTABLISHMENT NAME:		OWNER:				SATION OF TOUR FOOD OF			PERSON IN CHARGE:			
ADDRESS:						ABLIS	HMENT	NUMBER:	COUNTY:			
CITY/ZIP:		PHONE:			FAX:				P.H. PRIORITY : H	М	L	
RESTAURANT S	STORE CATEREI CHOOL SENIOR		LI /IMER F.	.P.		GROCE	RY STOR		INSTITUTION MOBILE EMP.FOOD	VENDOR	S	
PURPOSE Pre-opening Ro	outine Follow-up	Complaint	Othe	er								
FROZEN DESSERT Approved Disapproved Not Applicable License No.		PUBLI							ION-COMMUNITY PRIVATE Date Sampled Results _			
		RISK FAC		AND	INTE	RVENT	FIONS					
									ol and Prevention as contributing fac	tors in		
foodborne illness outbreaks. Public health interventions and Compliance Compliance Demonstration of Know		owledge	vledge COS R		, ,			Potentially Hazardous Foods		CO	S R	
	n in charge present, demoi erforms duties	nstrates knowledge,			IN (1 TUC	I/O N/A	Proper coo	oking, time and temperature			
	Employee Hea				IN OUT N/O N/A			Proper reheating procedures for hot holding				
	gement awareness; policy r use of reporting, restriction		+	+	IN OUT N/O N/A				Proper cooling time and temperatures Proper hot holding temperatures			
	Good Hygienic Pra	actices			IN OUT N/A			Proper col	Proper cold holding temperatures			
	r eating, tasting, drinking o charge from eyes, nose ar					N OUT N/O N/A			public health control (procedures /			
	Preventing Contamination	on by Hands		_		501 1	N/U IN/A	records)	Consumer Advisory			
IN OUT N/O Hands clean and properly washed					IN OUT N/A			Consumer advisory provided for raw or Indercooked food				
IN OUT N/O No bare hand contact with ready-t approved alternate method proper							Highly Susceptible Populations					
IN OUT Adequate handwashing facilities s accessible							Pasteurize offered	steurized foods used, prohibited foods not ered				
	Approved Sour								Chemical			
IN OUT Food obtained from approved sou IN OUT N/O N/A Food received at proper temperate					IN OUT N/A		Food additives: approved and properly used Toxic substances properly identified, stored and					
IN OUT Food in good condition, safe and u		unadulterated						Used Conformance with Approved Procedures				
IN OUT N/O N/A Requi	Required records available: shellst				IN OUT N/A Comp		Compliand	ce with approved Specialized Proce	s			
destru	Protection from Conta	amination						and HACC	CP plan			
IN OUT N/A Foods	separated and protected						the left o	f each item i	indicates that item's status at the tin	e of the		
IN OUT N/A Food-contact surfaces cleaned &		sanitized	zed			 inspection. IN = in compliance 			OUT = not in compliance			
	r disposition of returned, pr litioned, and unsafe food						= not appl =Correcte	licable ed On Site	N/O = not observed R=Repeat Item			
Tecono			DOD RE	TAIL F	PRACT	ICES			· · · · · · · · · · · · · · · · · · ·			
		ative measures to co	ntrol the COS				ogens, ch		d physical objects into foods.	COS		
	Safe Food and Water ggs used where required		005	R	IN	OUT	In-use u	rc Itensils: prop	oper Use of Utensils perly stored	005	R	
Water and ice from approved source							Utensils handled	, equipment and linens: properly stored, dried,				
	Food Temperature Contro						Single-u	ise/single-se	ervice articles: properly stored, used			
Adequate equipment for temperature cont Approved thawing methods used		ntrol					Gloves	used properl	ly Equipment and Vending			
Thermometers provided and accurate								nd nonfood-c	contact surfaces cleanable, properly			
Food Identification									ed, and used ies: installed, maintained, used; test			
Food property labeledy existing container						strips used Nonfood-contact surfaces clean						
Food properly labeled; original container Prevention of Food Contamination							NOTIOOC					
Insects, rodents, and animals not present Contamination prevented during food preparation, storage								Physical Facilities ot and cold water available; adequate pressure lumbing installed; proper backflow devices				
and display						•		•				
Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry						Sewage	e and wastev	vater properly disposed				
Wiping cloths: properly used and stored								Toilet facilities: properly constructed, supplied, cleaned				
Fruits and vegetables washed before use						Garbage/refuse properly disposed; facilities maintained Physical facilities installed, maintained, and clean						
Person in Charge /Title:	LA	, 32			-				ate:			
Inspector: Rauma	Markenn	· -		Tel	ephoi	ne No.	EPH		llow-up: Yes		No	
MO 580-1814 (9-13)	H IMPONY ()	DISTRIBUTION: WHITE	- OWNER'S	S COPY			CANARY – F		llow-up Date:		E6.37	



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FOOD ESTABLISHMENT INSPECTION REPORT						PAGE ² of			
ESTABLISHMEN	T NAME	ADDRESS		CITY/ZIP					
FOOD PRODUCT/LOCATION		TEMP. in ° F	CT/ LOCATI	ON	TEMP. ir	۱°F			
Code		PRIORITY IT	EMS	_		Correct by	Initial		
Reference	Priority items contribute directly to the or injury. These items MUST RECEN	elimination, prevention or reduction	to an acceptable level, hazar hours or as stated.	ds associated	with foodborne illness	(date)			
Code		CORE ITEI	MS			Correct by	Initial		
Reference	Core items relate to general sanitation standard operating procedures (SSO	n, operational controls, facilities or stu Ps). These items are to be correct	ructures, equipment design, <u>g</u> ed by the next regular inspe	peneral mainte ection or as s	nance or sanitation tated.	(date)			
							P		
							P		
		EDUCATION PROVID	DED OR COMMENTS						
Person in Ch	arge /Title:	,			Date:				
Inspector:	Peaning Markan	·	Telephone No.	EPHS No.	Follow-up:	Yes	No		
MO 580-1814 (9-13)		DISTRIBUTION: WHITE - OWNER'S COPY	Y CANARY – FILE CO	DPY	Follow-up Date:		E6.37A		