

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 THIS DAY, THE ITEMS NO CTION, OR SUCH SHORTER P	ERIOD OF TIME AS MA	AY BE SPEC	CIFIED	IN WRIT	ING BY T	HE REGU	LATORY AUTHORITY. FA			
ESTABLISHMENT I		CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULE OWNER:			3341101	NOI TO	UK I OOD	PERSON IN CHARGE:			
ADDRESS:	ADDRESS:			ESTABLISHMENT NUMBER:				COUNTY:			
CITY/ZIP:	PHONE:	PHONE:					P.H. PRIORITY :	Н	М	L	
ESTABLISHMENT TYPE BAKERY RESTAURANT	C. STORE CATER SCHOOL SENIOI		.I IMER F.P.		GROCEI AVERN	RY STOR		INSTITUTION TEMP.FOOD	MOBILE	VENDO	RS
PURPOSE Pre-opening	Routine Follow-up	Complaint	Other								
	T approved Not Applicable	SEWAGE DISPOSA PUBLIC			UPPLY //UNITY			DMMUNITY ampled	PRIVAT Results		
License No		PRIVATE RISK FACT) INTE	RVENT	IONS					
	preparation practices and employ	ree behaviors most com	monly repor	rted to th	ne Cente	ers for Dis		rol and Prevention as cont	ributing fac	tors in	
foodborne illness outbr Compliance	eaks. Public health intervention Demonstration of h				ne illnes	s or injury	/.	Potentially Hazardous Fo	nds	С	OS R
IN OUT	Person in charge present, dem	3 -		_		I/O N/A	Proper co	ooking, time and temperate			-
114 001	and performs duties Employee He	ealth				I/O N/A	Proper r	eheating procedures for ho	ot holding		
IN OUT	Management awareness; polic	y present		IN	OUT N	I/O N/A	Proper co	ooling time and temperatur			
IN OUT	Proper use of reporting, restric Good Hygienic F				1 TUO TUO	N/A N/A		ot holding temperatures old holding temperatures			
IN OUT N/O	Proper eating, tasting, drinking No discharge from eyes, nose					N/O N/A		ate marking and disposition a public health control (pro			
IN OUT N/O				IN	OUT N	I/O N/A	records)	1 "	cedures /		
IN OUT N/O	Preventing Contamina Hands clean and properly was			IN	OUT	N/A		Consumer Advisory er advisory provided for rav oked food	w or		
IN OUT N/O	No bare hand contact with read							Highly Susceptible Popula	tions		
IN OUT	approved alternate method pro Adequate handwashing facilitie			IN	OUT N	I/O N/A		zed foods used, prohibited	foods not		
	accessible Approved Sc	urce	-	- 111	001 1	1/O 11/A	offered	Chemical			
IN OUT	Food obtained from approved :	source		IN	OUT	N/A		ditives: approved and prop			
IN OUT N/O N/A	Food received at proper temper	erature		IN	OUT		Toxic sub	bstances properly identified	d, stored a	nd	
IN OUT	Food in good condition, safe and unadulterated						Conf	formance with Approved Pr			
IN OUT N/O N/A	destruction			IN	IN OUT N/A Compliance and HACCP				ce with approved Specialized Process CP plan		
IN OUT N/A	Protection from Cor Food separated and protected			The	letter to	the left o	f each item	indicates that item's statu	s at the tim	ne of the	
	Food-contact surfaces cleaned		+	inspection.							
Proper disposition of returned, proviously conved				IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed							
IN OUT N/O	reconditioned, and unsafe food	i				=Correcte	d On Site	R=Repeat Item			
	Good Retail Practices are preve		OD RETAIL			ngens ch	emicals ar	nd physical objects into for	nde		
IN OUT	Safe Food and Water		COS R	IN	OUT	ogeno, en		roper Use of Utensils	,43.	COS	R
	eurized eggs used where required rand ice from approved source	I						pperly stored nt and linens: properly store	ad driad		
vvale	r and ice from approved source					handled		it and linens, property store	eu, uneu,		
Adequ	Food Temperature Cou uate equipment for temperature of						se/single-sused prope	service articles: properly st	ored, used		
	oved thawing methods used	SOLITION				Cioves		s, Equipment and Vending			
Thern	nometers provided and accurate							-contact surfaces cleanable	e, properly		
	Food Identification			1		designed, constructed, and used Warewashing facilities: installed, maintained, used; to			used; test		
Food	properly labeled; original contain	er		-	strips used Nonfood-contact surfaces clean			urfaces clean			
	Prevention of Food Contar					Physical Facilities Hot and cold water available; adequate pressure					
	ts, rodents, and animals not presamination prevented during food			-				· available; adequate press ; proper backflow devices	ure		
and d	lisplay	, ,									
Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry							ewater properly disposed				
Wiping cloths: properly used and stored Fruits and vegetables washed before use				Toilet facilities: properly constructed, supplied, cleaned Garbage/refuse properly disposed; facilities maintained							
Fiults	and vegetables washed belore t	136		\perp				operly disposed; facilities r			
Person in Charge /1	Title:	0						ate:			
Inspector:	Total		IT.	elepho	ne No.	EPH	S No. F	ollow-up:	Yes		No
MO 580-1814 (9-13)	Man Ff !	DISTRIBUTION: WHITE -				CANARY - FI	F	ollow-up Date:			E6.37



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

FOOD ESTABLISHMENT INSPECTION REPORT

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ESTABLISHMENT NAME		ADDRESS		CITY/ZII	CITY/ZIP			
FOOD PRODUCT/LOCATION		TEMP. in ° F FOOD PRODUCT/			ION	TEMP. ir	۱° F	
Code		PRIORITY	ITEMS			Correct by	Initial	
Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	elimination, prevention or reduction E IMMEDIATE ACTION within 7 .	on to an acceptable level, haza 2 hours or as stated.	ards associate	d with foodborne illness	(date)		
Code		CORE IT	EMS			Correct by	Initial	
Reference	Core items relate to general sanitation standard operating procedures (SSOP	, operational controls, facilities or s). These items are to be corre	structures, equipment design, cted by the next regular ins	general maint pection or as	enance or sanitation stated.	(date)		
		EDUCATION DE C	UDED OD COMMENTS					
		EDUCATION PROV	IDED OR COMMENTS					
Person in Ch	arge /Title:	- <i>P</i>			Date:			
Inspector:	# ST 1	—	Telephone No.	EPHS No.	Follow-up:	Yes	No	
opeotor.	Mhain F.		reiephone No.		Follow-up Date:	. 00	140	



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ESTABLISHMENT NAME		ADDRESS		CITY/ZIF	CITY/ZIP			
FOO	OD PRODUCT/LOCATION	TEMP. in ° F	TEMP. in ° F FOOD PRODUCT/			TEMP. in ° F		
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	elimination, prevention or red	ITY ITEMS uction to an acceptable level, haza in 72 hours or as stated.	rds associate	d with foodborne illness	Correct by (date)	Initial	
Code Reference	Core items relate to general sanitation standard operating procedures (SSOP	, operational controls, facilities	E ITEMS s or structures, equipment design,	general maint	enance or sanitation	Correct by (date)	Initial	
	Standard operating procedures (SSOP		ROVIDED OR COMMENTS	ection of as	Stateu.			
		EDUCATION FF	ROVIDED OR COMMENTS					
D : ::	(T)							
Person in Ch	narge / litle:	**		EDUIC ::	Date:			
Inspector:	Manifel	DISTRIBUTION: WHITE - OWNER	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No E6.37A	