

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

TIME IN	TIME OUT					
DATE	PAGE 1 of					

			CTION, OR SUCH SHORTER F FOR CORRECTIONS SPECIF									AILURE TO	COMPL	Y
				OWNER:						PERSON IN CHARGE:				
ADDRESS:							ESTABLISHMENT NUMBER			NUMBER:	COUNTY:			
CITY/ZIP: PHON				PHONE:		FAX:				P.H. PRIORITY :	Н	М	L	
ESTABLISHMENT TYPE BAKERY C. STORE CATERER RESTAURANT SCHOOL SENIOR CENTER				PELI GROCERY STORE UMMER F.P. TAVERN				NSTITUTION EMP.FOOD	MOBILE '	VENDOR	S			
PURPOS			Routine Follow-up	Complaint		er				11	LIVIF.I OOD			
FROZI	EN DES	SSERT		SEWAGE DISPOS				JPPLY	′					
Approved Disapproved Not Applicable License No.								NON-COM Date Sam	MMUNITY npled	PRIVATI Results	E '			
	Licerise	NO		RISK FAC		AND	INTER	RVENT	TIONS					
Risk fa	ctors ar	e food p	reparation practices and emplo							ease Control	and Prevention as cont	ributing fac	tors in	
		s outbre	eaks. Public health intervention		es to pre						Note of all the code of Fe	. 1.	CO	· D
Compliar			Demonstration of Person in charge present, der	•		K	1	npliance			Potentially Hazardous For king, time and temperati		CO.	S R
IN O	JT		and performs duties						JI N/O N/A					
IN O			Employee F Management awareness; police				IN (N/O N/A					
IN O			Proper use of reporting, restrict			+			N/O N/A		holding temperatures	162		-
			Good Hygienic	Practices				OUT	N/A	Proper cold	holding temperatures			
	JT N/O		Proper eating, tasting, drinking No discharge from eyes, nose			_	IN	OUT	N/O N/A		e marking and dispositio public health control (pro			
IN O	JT N/C)	No discharge from eyes, flose	and moduli			IN (I TUC	N/O N/A	records)	public fleath control (pro	icedures /		
			Preventing Contamina								Consumer Advisory			
IN O	JT N/O		Hands clean and properly was	shed			IN	OUT	N/A	Consumer undercooke	advisory provided for raw or			
IN O	IN OUT N/O No bare hand contact with ready- approved alternate method prope									ghly Susceptible Popula	tions			
IN OUT Adequate handwashing facilities accessible						IN (OUT N/O N/A Pasteuriz offered			d foods used, prohibited	foods not			
IN OUT Food ob			Approved S				INI	OUT	N/A Food additiv		Chemical	arly upad		
) N/A	Food obtained from approved source Food received at proper temperature						N/A Food additives: approved and properly used Toxic substances properly identified, stored a			nd		
110 001 10/0 10/A					used			used	,					
IN OUT			Food in good condition, safe and unadulterated Required records available: shellstock tags, parasite			_	-		Conformance with Approved Procedures Compliance with approved Specialized Proce				10	_
IN OUT N/O N/A destruction				_		IN	OUT	N/A	and HACCI		izeu Floces	55		
Protection from Contaminatio IN OUT N/A Food separated and protected					+	The letter to the left of each item				ndicates that item's statu	s at the tim	e of the		
Total contest confesses also		Food-contact surfaces cleane		-		inspection.								
IN O	J I	N/A	Proper disposition of returned, previously served,				4		in compliance OUT = not in compliance = not applicable N/O = not observed					
IN O	UT N/O)	reconditioned, and unsafe foo				COS=Corrected On Site				R=Repeat Item			
					OOD RE	TAIL F	PRACT	ICES						
			Good Retail Practices are preven	entative measures to c	ontrol the		_	_	ogens, ch			ods.		
IN	OUT	Dootou	Safe Food and Water			R	IN OUT Proper Use of Utensils In-use utensils: properly stored						cos	R
			urized eggs used where require and ice from approved source	u						sils, equipment and linens: properly stored, dried,		ed, dried,		
									handled					
		Adogu	Food Temperature Co late equipment for temperature							se/single-serused properly	rvice articles: properly st	ored, used		
			ved thawing methods used	COTILIOI					Gioves		/ Equipment and Vending			
		Thermometers provided and accurate								d nonfood-co	ontact surfaces cleanable	e, properly		
		Food Hankbank								d, constructe				
		Food Identification		1			Warewash strips used		ashing facilities: installed, maintained, used; test					
		Food properly labeled; original container								l-contact surf				
		lnc '	Prevention of Food Conta						Hot == 1		hysical Facilities			1
			s, rodents, and animals not pres mination prevented during food								vailable; adequate press roper backflow devices	sure	+	
		and display									·			
		Personal cleanliness: clean outer clothing, hair res							Sewage	and wastew	ater properly disposed			
	fingernails and jewelry Wiping cloths: properly used and stored						Toilet fa	cilities: prope	erly constructed, supplied	d, cleaned	+	+		
Fruits and vegetables washed before use							Garbage/refuse properly disposed; facilities maintained							
_			···						Physical		talled, maintained, and c	lean		
Persor	n in Cha	arge /T	itie: /////////							Dat	te:			
Inspec	ctor:	MA	Mar. Bradia			Tel	lephor	ne No.	PHES		low-up: low-up Date:	Yes	١	10
MO 580-1	814 (9-13)	/	/	DISTRIBUTION: WHITE	– OWNER	'S COPY			CANARY – FI		.c.r up Duto.			E6.37

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE



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

PAGE

ESTABLISHMENT NAME		ADDRESS		CITY/ZIF	D		
FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODU	CT/ LOCAT			ı°F
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIORITY elimination, prevention or reduction /E IMMEDIATE ACTION within 7:	ITEMS on to an acceptable level, hazar 2 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 (SSOF	CORE IT n, operational controls, facilities or es). These items are to be corre	structures, equipment design, g	general maint	enance or sanitation	Correct by (date)	Initial
		,					DW
							DW
		EDUCATION PROV	IDED OR COMMENTS				
Person in Ch	arge /Title:				Date:		
Inspector: /	and Brader	`	Telephone No.	PHES No.	Follow-up:	Yes	No
MO 580-1814 (#-13)	wyw c w nawy	DISTRIBUTION: WHITE _ OWNER'S CO		DRV	Follow-up Date:		F6 37Δ