

## 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 R	<b>JUTINE</b>	INSPE	CTION, OR SUCH SHORTER P	ERIOD OF TIME AS N	MAY BE	<b>SPEC</b>	IFIED	IN WRI	TING BY 1	HE RE	GULA	ILITIES WHICH MUST BE CORRE		
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN ESTABLISHMENT NAME:			OWNER:					<u>UK FUC</u>	JD OF	PERSON IN CHARGE:				
ADDRESS:					ESTABLISHMENT			HMENT	NUMBI	ER:	COUNTY:			
CITY/ZIP:			PHONE:	PHONE:			FAX:				P.H. PRIORITY: H	М	L	
B	ISHMEN <sup>-</sup> AKERY ESTAUI		C. STORE CATER SCHOOL SENIO		ELI IMMER F	F.P.		GROCE AVERN	ERY STOR	!E		ISTITUTION MOBILE V	ENDOR	RS
PURPO:	SE re-openi	ng	Routine Follow-up	Complaint	Oth	ner								
FROZEN DESSERT Approved Disapproved Not Applicable			SEWAGE DISPOS	IBLIC COMMUNITY NO						NON-COMMUNITY PRIVATE Date Sampled Results				
	License	No		PRIVA RISK FAC		AND	INITE	D) /ENI	TIONS	Date	Jan	ipieu ivesuits		
Dick fo	ctore or	o food r	proparation practices and employ							-0250 C	ntrol	and Prevention as contributing fact	ore in	
foodbo	rne illnes		eaks. Public health intervention	ns are control measur	es to pre	event f	oodbor	ne illne	ss or injury		JIIII OI	and Frevention as contributing fact		
Complia	nce		Demonstration of Person in charge present, den		COS	S R	1	mpliance		Dropo		otentially Hazardous Foods king, time and temperature	СО	S R
IN O	JT		and performs duties	•			IN	OUT	N/O N/A	·				
IN O	LIT		Employee H Management awareness; police			_	_		N/O N/A			eating procedures for hot holding ling time and temperatures	_	
IN O	<u>UT</u> UT		Proper use of reporting, restrict						N/O N/A			holding temperatures		
IN 01	IT N/C		Good Hygienic F					OUT	N/A			holding temperatures		
	JT N/C		Proper eating, tasting, drinking No discharge from eyes, nose						N/O N/A			e marking and disposition bublic health control (procedures /		
IN O	UT N/C	)					IN	OUT	N/O N/A	record		,		
IN O	Preventing Contamination  IN OUT N/O Hands clean and properly washed					IN	OUT	N/A			Consumer Advisory advisory provided for raw or ad food			
IN OUT N/O  No bare hand contact with ready		dy-to-eat foods or						unden		ghly Susceptible Populations				
app		,	approved alternate method properly followed  Adequate handwashing facilities supplied &				Paste			Paste	ırizec	d foods used, prohibited foods not		
IN O	accessible					IN	OUT	N/O N/A	offere		· •			
IN OUT Food obtain		Food obtained from approved	Approved Source from approved source			IN OUT N/A		N/A	Chemical Food additives: approved and properly used					
IN OUT N/O N/A		O N/A	Food received at proper temperature				used					ibstances properly identified, stored and		
IN O	IN OUT		Food in good condition, safe and unadulterated  Required records available: shellstock tags, parasite									mance with Approved Procedures		
IN O	IN OUT N/O N/A Required records available: destruction			elistock tags, parasite			IN OUT N/		N/A	Compliance with approved Specialized Proces and HACCP plan				
			Protection from Co											
IN O	1 1						The letter to the left of each item inspection.				em in	idicates that item's status at the time	e of the	
IN O	1941				IN = in complian									
IN O	IN OUT N/O Proper disposition of returned, reconditioned, and unsafe food			/ed,			N/A = not appl COS=Correcte							
					OOD RE	ETAIL	PRACT	TICES						
	OUT		Good Retail Practices are preven		ontrol the		_	of path	nogens, ch	emicals			cos	
IIN	IN OUT Past		Safe Food and Wat urized eggs used where required	-	000	R	IN	001	In-use u	utensils: properly stored ils, equipment and linens: proper		per Use of Utensils erly stored	COS	R
			and ice from approved source						Utensils			and linens: properly stored, dried,		
			Food Temperature Co	ntrol					handled Single-u		e-ser	vice articles: properly stored, used		
			ate equipment for temperature						Gloves	used pro	perly	,		
			ved thawing methods used nometers provided and accurate						Food an			Equipment and Vending ontact surfaces cleanable, properly		
		1110111							designe	d, const	ructe	d, and used		
			Food Identification						strips us	Warewashing facilities: installed, maintained, used; tes strips used Nonfood-contact surfaces clean				
		Food	properly labeled; original contain				$\bot$		Nonfood					
	Prevention of Food Contamin Insects, rodents, and animals not present Contamination prevented during food prejudice and display Personal cleanliness: clean outer clothing							Physical Facilities cold water available; adequate pressure				+		
			preparation, storage					Plumbing installed; p		ed; pı	roper backflow devices			
			ning, hair restraint,			1				stewa	ater properly disposed			
			nails and jewelry g cloths: properly used and store	ed			1	Toilet facilities: pro		orope	rly constructed, supplied, cleaned			
			and vegetables washed before						Garbage	e/refuse	prope	erly disposed; facilities maintained		
D=::-	n in 01	ore: /T	itle:	) /			1	L	Physica	l facilitie		alled, maintained, and clean		
Perso	n in Ch	arge / I	IIIe.								Dat	ᡛ.		
Insped	ctor: [w	zuZ N	Nackay Katitypo Pecant			Те	lepho	ne No.	. EPH	S No.		ow-up: Yes ow-up Date:		No



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

FOOD ESTABLISHMENT INSPECTION REPORT

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ESTABLISHMEN	T NAME	ADDRESS		CITY/ZIP	CITY/ZIP			
FOO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUC	T/ LOCATI	LOCATION TEMP. in °			
		I LIVIF . III I		.,		TEIVII . II	ILIVIE', III E	
Code Reference	Priority items contribute directly to the	PRIORITY I elimination, prevention or reduction	TEMS n to an acceptable level, hazard:	s associated	with foodborne illness	Correct by (date)	Initial	
	Priority items contribute directly to the or injury. These items MUST RECEI	VE IMMEDIATE ACTION within 72	2 hours or as stated.				<b>Λ</b>	
						•	NI	
							RD	
							- 60 ·	
							RDL	
							RIX	
							<i>-</i> 65 (	
Code Reference	Core items relate to general sanitation standard operating procedures (SSO	CORE ITE n, operational controls, facilities or s Ps). These items are to be correc	structures, equipment design, ge	neral mainte	nance or sanitation	Correct by (date)	Initial	
							XX	
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							$\mathcal{K}\mathcal{U}$	
							XX	
							KU	
							R	
							XX	
		EDUCATION PROV	IDED OR COMMENTS					
	n /							
Person in Ch	narge /Title:				Date:			
Inspector: 1/1	whit Mackey Katityno Pecant		Telephone No.	PHS No.	Follow-up:	Yes	No	
MO 580-1814 (9-13)		DISTRIBUTION: WHITE - OWNER'S COP	PY CANARY – FILE COP	Y	Follow-up Date:		E6.37A	



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	Correct by (date)	Initial
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		,
	}	$\mathcal{K}\mathcal{U}$
Reference   Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation	Correct by (date)	Initial
standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.		KQ
		NU
		KT F
EDUCATION PROVIDED OR COMMENTS		
Person in Charge /Title: Date:		
Inspector: Living Markey Valling Pecaut  Telephone No. EPHS No. Follow-up: Follow-up Date:	Yes	No F6 374