

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 F	ROUTINE	E INSPE	CTION, OR SUCH SH	HORTER PER	NOD OF TIME AS	MAY BE	SPEC	IFIED	N WRI	TING BY	THE REGU	ACILITIES WHICH MUST BE CORRE- JILATORY AUTHORITY. FAILURE TO			
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED I ESTABLISHMENT NAME:				OWNER:					<u> </u>	OK 1 OOD	PERSON IN CHARGE:				
ADDRESS:					1	ESTABLISHMENT				SHMENT	NUMBEF	COUNTY:			
CITY/ZIP: PH					PHONE:	PHONE:						P.H. PRIORITY: H	М	L	
ESTABLISHMENT TYPE BAKERY C. STORE CATERER RESTAURANT SCHOOL SENIOR CENTER						DELI GROCERY STOR SUMMER F.P. TAVERN					RE INSTITUTION MOBILE VENDORS TEMP.FOOD				
PURPO	ose Pre-oper	ing	Routine	Follow-up	Complaint	Oth	ier								
FROZEN DESSERT Approved Disapproved Not Applicable				EWAGE DISPOSAL WATER SUPPLY COMMUNITY						NON-COMMUNITY PRIVATE					
	Licens	e No			PRIV						Date S	ampled Results			
					RISK FA										
			oreparation practices a eaks. Public health i i									trol and Prevention as contributing fact	ors in		
Compli			Demons	stration of Kno	owledge	COS			mpliance			Potentially Hazardous Foods	CO	S R	
IN C	OUT		Person in charge present, demonstrates knowledge,					IN	OUT	N/O N/A	Proper c	ooking, time and temperature			
			and performs duties Employee Health					IN	OUT	N/O N/A	Proper i	reheating procedures for hot holding			
	OUT		Management aware	eness; policy p	present			_		N/O N/A	A Proper cooling time and temperatures				
IN (TUC		Proper use of repor	ting, restrictio I Hygienic Pra					OUT OUT	N/O N/A N/A					
IN C	OUT N/)	Proper eating, tastir	ng, drinking or	tobacco use					N/O N/A		late marking and disposition			
IN C	OUT N/	0	No discharge from 6	eyes, nose an	d mouth			IN	OUT	N/O N/A	Time as records)	a public health control (procedures /			
			Preventing	Contaminatio	n by Hands		+				records)	Consumer Advisory		_	
IN (OUT N/)	Hands clean and pr	Hands clean and properly washed					OUT	N/A		er advisory provided for raw or			
INI (OUT N/	<u> </u>	No bare hand conta						underco						
		J	approved alternate						D. d. d	zed foods used, prohibited foods not					
IN C	DUT		Adequate handwashing facilities supplied & accessible					IN	OUT	N/O N/A	offered				
IN (OUT			pproved Sour			_	INI	OUT	N/A	Food ad	Chemical ditives: approved and properly used			
IN OUT N/O N/A			Food obtained from approved source Food received at proper temperature					IN OUT Toxi				bstances properly identified, stored an	t		
IN (IN OUT		Food in good condition, safe and unadulterated									formance with Approved Procedures			
IN C	IN OUT N/O N/A		Required records available: shellstock tags, parasite destruction					IN	OUT	N/A Compliance		nce with approved Specialized Process CCP plan	5		
				on from Conta	mination			┨							
IN C	DUT	N/A	Food separated and				The letter to the left of each item indicates that item's status at the time inspection.								
IN C	IN OUT N/A		Food-contact surfaces cleaned & sanitized						IN = in compliance OUT = not in compliance						
IN (IN OUT N/O		Proper disposition of returned, previously served, reconditioned, and unsafe food						N/A = not applicable N/O = not observed COS=Corrected On Site R=Repeat Item						
			reconditioned, and	unsaic ioou		SOOD RE	ETAIL	PRACT				.,			
					ative measures to o			_	_	hogens, ch		nd physical objects into foods.			
IN	Paste		Safe Food and Water urized eggs used where required			cos	R	IN	OUT	In uso i	Proper Use of Utensils e utensils: properly stored		cos	R	
			and ice from approve				+			Utensils	s, equipme	+	+		
			Fand Taren		-1					handled					
	Food Tempera Adequate equipment for tempera Approved thawing methods us									used prope	service articles: properly stored, used erly		+		
			used					Utensils, Equip			s, Equipment and Vending				
		Therm	Thermometers provided and accurate									-contact surfaces cleanable, properly cted, and used			
			Food Id						Warewa	ashing facilities: installed, maintained, used; test					
		Food	properly labeled; origi	nal container				+	\vdash	strips us		urfaces clean		+	
		1 000	Prevention of F		nation					14011100	u-contact s	Physical Facilities			
			s, rodents, and anima								r available; adequate pressure				
		Conta and di	mination prevented display	paration, storage					Piumbir	ig installed	; proper backflow devices				
	Personal cleanliness: clean outer clothin				g, hair restraint,				8		Sewage and wastewater properly disposed				
-	fingernails and jewelry Wiping cloths: properly used and stored				 		+		Toilet fa	t facilities: properly constructed, supplied, cleaned			+		
Fruits and vegetables washed before use)					Garbag	e/refuse pr	operly disposed; facilities maintained					
Doro	on in C	orgo /T	Title: 1	> ^		<u> </u>]		<u> </u>	Physica		nstalled, maintained, and clean	1		
reisi	on in Cl	narge /T	itle: hot-5, l	NOT								Date:			
Inspe	ector:	Valiti	n Plant				Te	elepho	ne No	. PHE		Follow-up: Yes	1	No	



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ESTABLISHMEN	TNAME	ADDRESS		CITY/ZII	CITY/ZIP			
FOO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODU	JCT/ LOCAT	TION	TEMP. in ° F		
Code		PRIORITY	ITEMS			Correct by	Initial	
Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	elimination, prevention or reductio E IMMEDIATE ACTION within 72	n to an acceptable level, haza 2 hours or as stated.	ards associate	d with foodborne illness	(date)		
							2EM	
Code Reference	Core items relate to general sanitation	CORE ITI, , operational controls, facilities or s	structures, equipment design,	general maint	enance or sanitation	Correct by (date)	Initial	
	standard operating procedures (SSOP	s). These items are to be correct	cted by the next regular insp	pection or as	stated.			
		EDUCATION PROV	IDED OR COMMENTS					
	hot E. Wat							
Person in Ch					Date:			
Inspector:	tetipo Recurt		Telephone No.	PHES No.	Follow-up: Follow-up Date:	Yes	No	

MO 580-1814 (9-13)