

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	INSPE	TION THIS DAY, THE ITEMS N CTION, OR SUCH SHORTER F	PERIOD OF TIME AS I	MAY BE	SPEC	IFIED	IN WRI	TING BY 1	THE REGI	JLATORY AU	THORITY. FA			
				OWNER:	IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OWNER:					PERSON IN CHARGE:					
ADDRESS:				-	ESTABLISHMENT NUMBE				NUMBE	R: COUNT	Υ:				
CITY/ZIP:				PHONE:	PHONE:			FAX:			P.H. PR	RIORITY:	Н	М	L
ESTABLISHMENT TYPE BAKERY C. STORE CATERER RESTAURANT SCHOOL SENIOR C					DELI GROCERY STORE SUMMER F.P. TAVERN				INSTITUTIO TEMP.FOOD	INSTITUTION MOBILE VENDORS TEMP.FOOD					
PURPO	OSE Pre-open	ing	Routine Follow-up	Complaint	Oth	ner									
FROZEN DESSERT Approved Disapproved Not Applicable				SEWAGE DISPOSAL WATER SUPPLY PUBLIC COMMUNITY					NON-COMMUNITY PRIVATE						
	Licens	e No		PRIV	ATE					Date S	Sampled		Results		
				RISK FAC											
			oreparation practices and emplo eaks. Public health intervention								trol and Preve	ntion as contr	ibuting fact	ors in	
Compli			Demonstration of		COS			mpliance			Potentially H	lazardous Fo	ods	CC	S R
IN C	DUT		Person in charge present, der and performs duties	monstrates knowledge,			IN	OUT	N/O N/A	N/A Proper cooking, time and temperature			ıre		
			Employee F	lealth			IN	OUT	N/O N/A	/A Proper reheating procedures for hot holding					
	TUC		Management awareness; poli	cy present					N/O N/A		cooling time ar		es		
IN C	DUT		Proper use of reporting, restriction Good Hygienic					OUT OUT	N/O N/A N/A		hot holding ten				
IN C	OUT N/O)	Proper eating, tasting, drinking	g or tobacco use					N/O N/A	Proper	date marking a	nd disposition			
IN C	OUT N/	0	No discharge from eyes, nose	and mouth			IN	OUT	N/O N/A	Time as records	a public healt	h control (pro	cedures /		
			Preventing Contamin								Consun	ner Advisory			
IN C	OUT N/C)	Hands clean and properly was	shed			IN	OUT	N/A	I/A Consumer advisory provided for raw or undercooked food			v or		
IN C	OUT N/0)	No bare hand contact with ready-to-eat foods or							Highly Susceptible Populations			tions		
			approved alternate method properly followed Adequate handwashing facilities supplied &						Pasteurized foods used, prohibited			d prohibited	foods not		
IN C	IN OUT		accessible				IN	OUT	N/O N/A offered			10003 1101			
IN C	DUT		Approved S Food obtained from approved				INI	OUT	N/A	Food or	Ch Iditives: approv	emical	arly used		
			Food received at proper temperature							ubstances prop			d		
IN C	IN OUT		Food in good condition, safe and unadulterated					Conformance with Approved Proced Compliance with approved Specialized F							
IN C	IN OUT N/O N/A		Required records available: shellstock tags, parasite destruction				IN OUT N/A Compliand and HACC				oved Speciali	zed Proces	S		
Protection from Conta															
11 00. 11/A			Food separated and protected					The letter to the left of each item indicates that item's status at the inspection.					s at the time	e of the	
IN C	IN OUT N/A Food-contact surfaces clea						IN = in compliance OUT = not in compliance					ce			
IN (OUT N/	Proper disposition of returned, preconditioned, and unsafe food						N/A = not app COS=Correcte		plicable N/O = not observed sted On Site R=Repeat Item					
					OOD RE	ETAIL	PRAC	TICES							
IN	OUT		Good Retail Practices are prev		ontrol the	e intro	duction IN	of path	nogens, ch				ds.	COS	R
IIN	001	Paste	Safe Food and Water equired eggs used where required			K	IIN	001	In-use u	Proper Use of Utensils se utensils: properly stored				003	K
			and ice from approved source							Utensils, equipment and linens: properly stored, dried,					
	+		Food Temperature Co	ontrol			+			handled Single-use/single-ser Gloves used properly		s: properly sto	ored, used		
			ate equipment for temperature	control											
	-		ved thawing methods used nometers provided and accurate	1					Food an	Utensils, Equipment and Vending Food and nonfood-contact surfaces cleanable			nronerly		
		1110111	·						designed, construc		cted, and used	ed, and used			
			Food Identification	n					Warewa strips us		ilities: installed	, maintained,	used; test		
		Food	properly labeled; original contain								surfaces clean				
		Incost	Prevention of Food Conta s, rodents, and animals not pre-						Hot and	Physical Facilities Hot and cold water available; adequate pressure Plumbing installed; proper backflow devices			uro		
	+		s, rodents, and animals not pre-				1						uic		+
	1	and di	splay			-	1	<u> </u>						1	
	Personal cleanliness: clean outer clothi fingernails and jewelry			ning, nair restraint,								water properly disposed			
		Wiping	g cloths: properly used and stor						Toilet facilities: properly constructed Garbage/refuse properly disposed;			cted, supplied	l, cleaned		
	Fruits and vegetables washed before us			use			+	 			roperly dispose installed, main				+
Perso	on in Ch	arge /T	itle: A Do	n <i>P</i>	1				, ,,,,,,,,		Date:	,	-		•
1	oto = 1	, ,		<u> </u>		I . -	Jost -	no Nis	DITE	CN	Tallar		Voc		Ne
Inspector: Yew May Latity Reaut							iehi 10	ne No	PHE		Follow-up: Follow-up Da	te [.]	Yes		No



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ESTABLISHMEN	T NAME	ADDRESS		CITY/ZI	р		
FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODU	JCT/ LOCAT	ION	TEMP. in ° F	
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIN	PRIORIT elimination, prevention or reduc	Y ITEMS tion to an acceptable level, haza	ards associate	d with foodborne illness	Correct by (date)	Initial
	of injury. These items wood RECEN	VE IMMEDIATE ACTION WITHIN	12 Hours of as stated.				LB
Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	CORE n, operational controls, facilities o s). These items are to be core	or structures, equipment design,	general main	tenance or sanitation stated.	Correct by (date)	Initial
							LiB
							LB LB
							V D
		EDUCATION PRO	OVIDED OR COMMENTS				
Person in Ch	narge /Title:	wns			Date:		
Inspector:	ent Mark Latin	Peart	Telephone No.	PHES No.	Follow-up: Follow-up Date:	Yes	No

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