

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	TION THIS DAY, THE ITEMS NO CTION, OR SUCH SHORTER P	ERIOD OF TIME AS MA	AY BE SPEC	CIFIED I	N WRIT	ING BY 1	THE REGU	JLATORY AUTHORITY. FAI				
ESTABLISHMENT N		IONS SPECIFIED IN THIS NOTICE MAY RESULE OWNER:			334110	NOI TO	OK I OOD	PERSON IN CHARGE:				
ADDRESS:	RESS:			ESTABLISHMENT NUMBER:				R: COUNTY:	COUNTY:			
CITY/ZIP:	CITY/ZIP: PHONE:			FAX:				P.H. PRIORITY :	Н	М	L	
ESTABLISHMENT TYPE BAKERY RESTAURANT	C. STORE CATER SCHOOL SENIOI		.I IMER F.P.		GROCEI AVERN	RY STOR	ŀΕ	INSTITUTION TEMP.FOOD	MOBILE V	'ENDOF	RS	
PURPOSE Pre-opening	Routine Follow-up	Complaint	Other									
	approved Not Applicable	SEWAGE DISPOSA PUBLIC			UPPLY //UNITY			OMMUNITY ampled	PRIVATE Results			
License No		PRIVAT		INTE	RVENT	IONS						
	preparation practices and employ	ree behaviors most com	monly repor	ted to th	ne Cente	ers for Dis		trol and Prevention as contrib	outing facto	ors in		
foodborne illness outbroompliance	eaks. Public health intervention Demonstration of h				ne illnes mpliance	s or injury	/. 	Potentially Hazardous Foo	ds	CC	OS R	
IN OUT	Person in charge present, dem		1	+		I/O N/A	Proper o	cooking, time and temperatur			,,,	
114 001	and performs duties Employee He	ealth		IN (I/O N/A	Proper	reheating procedures for hot	holding			
IN OUT	Management awareness; polic	y present		IN	OUT N	I/O N/A	Proper o	cooling time and temperature				
IN OUT	Proper use of reporting, restric Good Hygienic F				<u>1 TUO</u> TUO	N/A N/A		not holding temperatures cold holding temperatures			-	
IN OUT N/O	Proper eating, tasting, drinking No discharge from eyes, nose					N/O N/A		date marking and disposition a public health control (proc	oduros /			
IN OUT N/O	5			IN	OUT N	N/O N/A	records)		edules /			
IN OUT N/O	Preventing Contamina Hands clean and properly was			IN	OUT	N/A		Consumer Advisory er advisory provided for raw oked food	or			
IN OUT N/O	No bare hand contact with read							Highly Susceptible Population	ons			
IN OUT	approved alternate method pro Adequate handwashing facilitie			INI	OUT N	I/O N/A	Pasteuri	zed foods used, prohibited fo	oods not			
	accessible Approved Sc	urce	-	IIN	001 1	N/O IN/A	offered	Chemical		_		
IN OUT	Food obtained from approved :	source		IN	OUT	N/A		ditives: approved and proper				
IN OUT N/O N/A	Food received at proper temper	rature		IN	OUT		Toxic su used	bstances properly identified,	stored and	d		
IN OUT	Food in good condition, safe a			Confor			Con	formance with Approved Pro				
IN OUT N/O N/A	Required records available: shellstock tags, parasite destruction			IN OUT N/A Compliance with approved Specialized P and HACCP plan			ed Process	5				
IN OUT N/A	Protection from Cor Food separated and protected	ntamination		The	letter to	the left o	f each iten	n indicates that item's status	at the time	of the		
IN OUT N/A	Food-contact surfaces cleaned	& sanitized		inspection. IN = in compliance OUT = not in compliance								
Proper disposition of returned, provingely served				N/A = not applicable N/O = not observed								
IN OUT N/O	reconditioned, and unsafe food		OD DETAIL	DDAG		=Correcte	ed On Site	R=Repeat Item				
	Good Retail Practices are preve		OD RETAIL			ogens, ch	emicals, a	nd physical objects into food	s.			
IN OUT	Safe Food and Water	er	COS R	IN	OUT		Р	roper Use of Utensils		cos	R	
	urized eggs used where required r and ice from approved source			-				operly stored nt and linens: properly stored	d dried			
						handled		. , ,	<i>,</i> ,			
Adequ	Food Temperature Cou uate equipment for temperature of			-			ıse/single- used prope	service articles: properly stor erlv	ed, used			
Appro	ved thawing methods used						Utensil	ls, Equipment and Vending				
Therm	nometers provided and accurate							I-contact surfaces cleanable,	properly			
	Food Identification					designed, constructed, and used Warewashing facilities: installed, maintained, used; test strips used						
Food	Food properly labeled; original container					Nonfood-contact surfaces clean						
Insect	Prevention of Food Contamination			Physical Facilities Hot and cold water available; adequate pressure						-		
	Insects, rodents, and animals not present Contamination prevented during food preparation, storage			1				l; proper backflow devices	10			
and di Perso		ing, hair restraint		+		Sewane	and wast	ewater properly disposed				
Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			1				, .	.1				
	g cloths: properly used and store and vegetables washed before ι			+				operly constructed, supplied, roperly disposed; facilities ma				
							l facilities i	installed, maintained, and cle				
Person in Charge /T	Title: The SMM 1	110						Date:				
Inspector:	Mulux paylor Bu	rdel	Te	elepho	ne No.	EPH			Yes		No	
MO 580-1814 (9-13)	() /	DISTRIBUTION: WHITE -	- OWNER'S COP	Υ	(CANARY – F		Follow-up Date:			E6.37	



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ESTABLISHMENT NAME		ADDRESS		CITY/ZII	CITY/ZIP			
FOOD PRODUCT/LOCATION		TEMP. in ° F	TEMP. in ° F FOOD PRODUCT/ L			TEMP. ir	n°F	
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIO elimination, prevention or re /E IMMEDIATE ACTION wit	RITY ITEMS duction to an acceptable level, haz thin 72 hours or as stated.	ards associate	d with foodborne illness	Correct by (date)	Initial	
							KB	
Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.							
	standard operating procedures (650)	S). These rems are to be	torrected by the next regular ma	occion or as	Stateu.		KB	
							KB	
							KB	
							KB	
							KB	
							KB	
EDUCATION PROVIDED OR COMMENTS								
Person in Ch	narge /Title: Kenshirk	No			Date:			
Inspector://	marge Mille: The SMM. Maylax Jaylort	Brady	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No	



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ESTABLISHMEN	T NAME	ADDRESS		CITY/ZI	P		
FOOD PRODUCT/LOCATION		TEMP. in ° F	JCT/ LOCAT	TION	TEMP. ir	ı°F	
Code		PRIORITY I	TEMS			Correct by	Initial
Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	elimination, prevention or reductio VE IMMEDIATE ACTION within 72	n to an acceptable level, haza ! hours or as stated.	ards associate	d with foodborne illness	(date)	
Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	CORE ITI n, operational controls, facilities or selections. Solutions in the control of the co	structures, equipment design,	general maint	enance or sanitation	Correct by (date)	Initial
	, common sports and sports are sports and sports are sports and sports and sports and sports and sports and sports are sports and sports and sports and sports and sports and sports are sports and sports and sports and sports are sports and sports and sports and sports are sports and sports and sports are sports and sports and sports and sports are sports and sports and sports are sports and sports and sports are sports and sports and sp	<u></u>					KB
							111
							KB
		EDUCATION PROV	IDED OR COMMENTS				
Person in Ch	narge/Title: Le_SMM wyd Mulwy saylor I.	No			Date:		
Inspector:	und Makey jaylor E.	Rady	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No