



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

TIME IN 1130 TIME OUT 1400  
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BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: **MI RANCHITO** OWNER: **JESUS JASSO** PERSON IN CHARGE: **BRIANNA Kidwell**  
 ADDRESS: **1730 FIRST STREET** COUNTY: **069**  
 CITY/ZIP: **KENNETT, MO 53857** PHONE: **573-717-7070** FAX: \_\_\_\_\_ P.H. PRIORITY:  H  M  L  
 ESTABLISHMENT TYPE  
 BAKERY  C. STORE  CATERER  DELI  GROCERY STORE  INSTITUTION  MOBILE VENDORS  
 RESTAURANT  SCHOOL  SENIOR CENTER  SUMMER F.P.  TAVERN  TEMP.FOOD  
 PURPOSE  
 Pre-opening  Routine  Follow-up  Complaint  Other  
 FROZEN DESSERT  Approved  Disapproved SEWAGE DISPOSAL  PUBLIC  PRIVATE WATER SUPPLY  COMMUNITY  NON-COMMUNITY  PRIVATE  
 License No. NA Date Sampled \_\_\_\_\_ Results \_\_\_\_\_

RISK FACTORS AND INTERVENTIONS

Risk factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
<input checked="" type="checkbox"/> OUT	Person in charge present, demonstrates knowledge, and performs duties			<input checked="" type="checkbox"/> OUT N/D N/A	Proper cooking, time and temperature		
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			IN OUT N/D N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			IN OUT N/D N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT N/D	Proper eating, testing, drinking or tobacco use			<input checked="" type="checkbox"/> OUT N/D N/A	Proper hot holding temperatures		
<input checked="" type="checkbox"/> OUT N/D	No discharge from eyes, nose and mouth			<input checked="" type="checkbox"/> OUT N/A	Proper cold holding temperatures		
IN OUT N/D	Hands clean and properly washed			IN OUT N/D N/A	Proper date marking and disposition		
IN OUT N/D	No bare hand contact with ready-to-eat foods or approved alternate method properly followed			IN OUT N/D N/A	Time as a public health control (procedures / records)		
IN OUT N/D	Adequate handwashing facilities supplied & accessible			IN OUT N/D N/A	Consumer advisory provided for raw or undercooked food		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input checked="" type="checkbox"/> OUT N/A	Pasteurized foods used, prohibited foods not offered		
IN OUT N/D N/A	Food received at proper temperature			IN OUT N/D N/A	Food additives: approved and properly used		
IN OUT N/D N/A	Food in good condition, safe and unadulterated			IN OUT N/D N/A	Toxic substances properly identified, stored and used		
IN OUT N/D N/A	Required records available: shellstock tags, parasite destruction			IN OUT N/D N/A	Compliance with approved Specialized Process and HACCP plan		
IN OUT N/D N/A	Food separated and protected						
IN OUT N/D N/A	Food-contact surfaces cleaned & sanitized						
IN OUT N/D N/A	Proper disposition of returned, previously served, reconditioned, and unsafe food						

The letter to the left of each item indicates that item's status at the time of the inspection.  
 IN = in compliance      OUT = not in compliance  
 N/A = not applicable      N/D = not observed

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

IN	OUT	Safe Food and Water	COS	R	IN	OUT	Proper Use of Utensils	COS	R
X		Pasteurized eggs used where required			X		In-use utensils: properly stored		
X		Water and ice from approved source			X		Utensils, equipment and linens: properly stored, dried, handled		
X		Adequate equipment for temperature control			X		Single-use/single-service articles: properly stored, used		
X		Approved thawing methods used			X		Gloves used properly		
X		Thermometers provided and accurate			X		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
X		Food properly labeled; original container			X		Warewashing facilities: installed, maintained, used; test strips used		
X		Insects, rodents, and animals not present			X		Nonfood-contact surfaces clean		
X		Contamination prevented during food preparation, storage and display			X		Physical Facilities		
X		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			X		Hot and cold water available; adequate pressure		
X		Wiping cloths: properly used and stored			X		Plumbing installed; proper backflow devices		
X		Fruits and vegetables washed before use			X		Sewage and wastewater properly disposed		
					X		Toilet facilities: properly constructed, supplied, cleaned		
					X		Garbage/refuse properly disposed; facilities maintained		
					X		Physical facilities installed, maintained, and clean		

Person in Charge / Title: **BRIANNA Kidwell** Date: **08/05/2020**  
 Inspector: *Clayton D. Paul* Telephone No. **573-888-9008** EPHS No. **1647** Follow-up:  Yes  No  
 Follow-up Date: **8/12/2020**

