

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

TIME IN 930			TIME OUT 1200				
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NEXT ROUTIN	E INSPE		IOD OF TIME AS	MAY BE	E SPEC	CIFIED	IN WE	RITING BY	THE RE	R FACILITIES WHICH MUST BE COF EGULATORY AUTHORITY. FAILURE OD OPERATIONS.				
ESTABLISHMENT NAME: OWNER:				& BAYLEY,INC				1011 01 10	OIV. C					
		T FRANCIS STREET		<u> </u>		,				COUNTY: 069	(//(w		
CITY/ZIP: KENNETT, MO 63857 PHONE: 573-888-88				888 FAX:										
BAKERY RESTAU		C. STORE CATERER SCHOOL SENIOR O	R DE	ELI JMMER	F.P.		GROC	ERY STOR	RE	☐ INSTITUTION ☐ MOBI	LE VENDOI	RS		
PURPOSE Pre-oper	ning	☐ Routine ☐ Follow-up	☐ Complaint	Ot	her									
FROZEN DE	☐ Dis		DSAL PRIVATE	=		TER S				-COMMUNITY PRIV.		***************************************		
License No. N	IA		RISK FA	CTORS	SAND	INTE	RVEN	NTIONS						
Risk factors	are food p	preparation practices and employee	behaviors most co	mmonly	y report	ed to t	he Ce	nters for Dis	ease C	ontrol and Prevention as contributing	factors in			
foodborne illne Compliance	ess outbr	eaks. Public health interventions Demonstration of Kno	THE RESERVE THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER.	res to pr			rne illn		/.	Potentially Hazardous Foods	Loc	OS R		
	OUT	Person in charge present, demon				-		T ND N/A Proper cooking, time and temperature				1		
		Employee Heal						N N/A		er reheating procedures for hot holding	g			
	OUT	Management awareness; policy p Proper use of reporting, restriction			-		OUT	N/O N/A		er cooling time and temperatures er hot holding temperatures				
		Good Hygienic Prac	ctices				OL	JT N/A	Prope	r cold holding temperatures				
OUT	N/O N/O	Proper eating, tasting, drinking or No discharge from eyes, nose and		-			QUIT	N/O N/A		r date marking and disposition as a public health control (procedures	1	-		
OUT	N/O	Preventing Contamination	hy Hande		_	IIN	OUT	N/O N	record					
OUT	N/O	Hands clean and properly washed			T	IN	OL	IT N	Concurrent advisory provided for row or					
OUT	OUT N/O No bare hand contact with ready-to-eat foods or approved alternate method properly followed					T			Highly Susceptible Populations					
iN (Adequate handwashing facilities s accessible					OUT	N/O N/A	Paster	urized foods used, prohibited foods no	ot			
	NIT.	Approved Source				1_		- N/A		Chemical				
and the second second	OUT Food obtained from approved source OUT NO N/A Food received at proper temperature			+			IN Toxic substances properly ident			additives: approved and properly use substances properly identified, stored		+		
	UT	Food in good condition, safe and u	ınadulterated	+	+	\vdash			used	onformance with Approved Procedure	S	-		
IN OUT N/C) N	Required records available: shells destruction	tock tags, parasite			IN	OU	T N	Comp	liance with approved Specialized Prod ACCP plan				
		Protection from Contar	nination			-								
IN C	N/A	Food separated and protected	10 1			The letter to the left of each item indicates that item's statulinspection.			em indicates that item's status at the	ime of the				
IN COL	Proper disposition of returned proviously served				-	IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed								
IN OUT	NED	Proper disposition of returned, previously served, reconditioned, and unsafe food												
		Good Retail Practices are preventat	the state of the s	OOD RE	Marie Company		NAME AND ADDRESS OF THE OWNER, OR OTHER	hogens, che	emicals.	and physical objects into foods.				
IN OUT		Safe Food and Water		cos	R	IN	OUT			Proper Use of Utensils	cos	R		
X		rized eggs used where required and ice from approved source				×				properly stored nent and linens: properly stored, dried		+		
×		Objective Comment 2 and Protein Indian of Local # ■ Comment (A. C				×		handled						
×	Adequ	Food Temperature Control ate equipment for temperature control				X		Gloves u		e-service articles: properly stored, use perly	a	-		
X		pproved thawing methods used							Utensils, Equipment and Vending					
×	inem	mometers provided and accurate				×			ood and nonfood-contact surfaces cleanable, properly esigned, constructed, and used					
		Food Identification					×	Warewas strips use	rewashing facilities: installed, maintained, used; test					
X	Food p	od properly labeled; original container					×		Nonfood-contact surfaces clean					
×	Insects	Prevention of Food Contamination cts, rodents, and animals not present				×		Hot and	Physical Facilities Hot and cold water available; adequate pressure			-		
×	Contamination prevented during food preparation, storage and display				×			Plumbing installed; proper backflow devices						
Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry					×		Sewage a	Sewage and wastewater properly disposed						
×	Wiping cloths: properly used and stored					×				roperly constructed, supplied, cleaner				
×	Fruits and vegetables washed before use					X		Garbage/refuse properly disposed; facilities maintained Physical facilities installed, maintained, and clean			3	-		
Person in Ch	arge /Ti	tle:	10//						THE RESERVE AND PERSONS NAMED IN	Date: 03/25/2019f				
Inspector:	7	Stephanie U	New Telepi	hone N	lo.		T	EPHS No		Follow-up: Yes		No		
7	hus	Traclas	573-8	388-9	800		1	1647		Follow-up Date: 04/12/2019	had			



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ESTABLISHMEN HUCKS	FOOD & FUEL #321	ADDRESS 506 ST FRANC	IS STREE	KENNETT, MO 63857				
FC	OOD PRODUCT/LOCATION	TEMP. in ° F	F	OOD PRODUCT/	TEMP. i	n°F		
SAN	DWICH DISPLAY COOLER	35		HOT DOGS/ W	OT DOGS/ WARMER			
TURK	KEY SUB/ DISPLAY COOLER	35	CHI	CKEN LIVER/ LEI	FT WARMER	148	3	
	DELI WALK IN COOLER	40	MA	AC&CHEESE/LEF	SE/LEFT WARMER)	
BEVE	ERAGE WALK IN COOLER	40	RIGH	T WARMER/CH	ICKEN BITES	135		
	BLUE AIR COOLER	32						
Code Reference	Priority items contribute directly to the e	Correct by (date)	Initial					
3-501.17	Multiple items in Blue Air cooler be			NAME OF TAXABLE PARTY.		04/12/2019	Sun	
7-202.11	Antifreeze in kitchen next to single					cos	5cm	
5-205.12	Hose connected to mop sink fauce					cos	Sun	
4-601.11A	Soda fountains heads soiled with o					04/12/2019		
4-601.11A	Ice maker baffles soiled with black	residue, clean and sanitiz	e			04/12/2019	Sun	
3-302.11	Raw eggs above fully cooked biscu	uits,				04/12/2019	SUM	
I-601.11A	Vent hood soiled with dust and deb	oris, clean and sanitize				04/12/2019	sim	
						04/12/2019	SUM	
Code Reference	Core items relate to general sanitation,	operational controls, facilities	ITEMS or structures, equi	pment design, genera	al maintenance or sanitation	Correct by (date)	Initial	
204.42	standard operating procedures (SSOPs). These items are to be co	rrected by the ne	kt regular inspection		04/12/2019	ent see	
5-301.12	No towels at kitchen hand sink					04/12/2019		
-302.14	No test strips for f3 bay sink	ad with apillad aversa, alac	n and conitiza			04/12/2019		
-601.11C	Cabinet under Slushy machine soil					04/12/2019	-	
3-305.11 3-601.11C	Boxes of Potatoes and eggs stored on floor in walk in cooler Bottom of Blue Air Freezer behind 3 bay sink soiled with food, clean and sanitize							
						04/12/2019		
		EDUCATION PRO	OVIDED OR CO	MMENTS				
Person in Ch	narge /Title:	1101/	,		Date: 03/25/20	19f		
nspector:/	1 plan	i M New Telephone	No.	EPHS No.	Follow-up: Yes No			
573-888-9008 1647 Follow-up Date: 04/12							- 140	

MO 580-1814 (9-13)