

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

|   | TIME IN | 11 | 00 | TIME OUT 1215 |  |  |  |
|---|---------|----|----|---------------|--|--|--|
| İ | PAGE    | 1  | of | 2             |  |  |  |

| NEXT POLITIME   | INSPEC   | TION OR SH   | Y, THE ITEMS NOT                               | HOD OF TIME AS I                      | MAY BE SPE            | JIFIED I       | N WRIT                | TING BY T  | HE REGULA   | ATORY AUTHORIT                             | JST BE CORREC<br>Y. FAILURE TO | TED BY THE<br>COMPLY |
|---|--|--|--|---------------------------------------|-----------------------|----------------|-----------------------|--|---|--|--------------------------------|----------------------|
| WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED ESTABLISHMENT NAME:  DOLLAR TREE |  |  |  | OWNER:<br>DOLLAR                      |                       |                | Tammy Cornett         |  |   |  |                                |                      |
| ADDRESS:  | 730  | FIRST S  | TREET  | •                                     |                       |                |                       |  |   | COUNTY: 06                                 | 9                              |                      |
| CITY/ZIP:K  |  |  |  | PHONE: 573-717-764                    | 2                     | FAX:           |                       |  |   | P.H. PRIORIT                               | Y:                             | M 🔳 L                |
| ESTABLISHMEN BAKERY RESTAU  |  | C. STOR  |  |                                       | ELI<br>IMMER F.P.     |                | ROCE<br>AVERN         | RY STOR  |   | NSTITUTION<br>EMP.FOOD                     | ☐ MOBILE VE                    | ENDORS               |
| PURPOSE Pre-open  |  | Routine  | ■ Follow-up                                    | ☐ Complaint                           | ☐ Other               |                |                       |  |   |  |                                |                      |
| FROZEN DE   | SSERT Disa   | approved   | SEWAGE DISP                                    | OSAL PRIVATE                          |                       | TER SI<br>COMM |                       |  |   | MMUNITY                                    | PRIVATE Results                |                      |
| License No. N   | Α  | 1  |  |                                       | en rei zwatki         | INTE           | eveni                 | TIONS :  |   |  |                                |                      |
| Risk factors a  | re food r  | reparation pra   | ctices and employee                            | behaviors most co                     | mmonly repor          | ted to th      | e Cente               | ers for Dis  | ease Contro   | and Prevention as                          | contributing facto             | rs in                |
| foodborne illne<br>Compliance   | ss outbre  | eaks. Public he  | ealth interventions<br>Jensor stration of Kr   | are control measur                    | es to prevent         | foodbort       | ne illnes<br>npliance | ss or injury   | E:  | Potentially Hazardon                       |                                |                      |
|   | TUC  | Person in cha  | arge present, demor                            | istrates knowledge,                   |                       | IN C           | 1 TUC                 | √/O \ <b>™</b>   | Proper cod  | king, time and temp                        | perature                       |                      |
|   |  | and performs   | Employee Hea                                   |                                       |                       | IN C           |                       | 1/O 1  |   | neating procedures                         |                                |                      |
|   | DUT<br>TUC   | Proper use of  | f reporting, restriction                       | n and exclusion                       |                       |                |                       | V/O M  | Proper hot  | nling time and tempe<br>holding temperatur | es                             |                      |
|   |  |  | Good Hydenic Pra<br>, tasting drinking o       | P\$(P#S:                              |                       | IN C           | TUO                   | N/A  |   | d holding temperatu<br>e marking and dispo |                                |                      |
| OUT   | N/O  |  | from eyes, nose an                             |                                       |                       |                |                       | WO I   | Time as a   | public health contro                       |                                |                      |
| 001   | 14/0   | Pres   | enong Contaminatio                             | r by Hands                            |                       |                |                       |  | records)  | Consumb Advi                               | SOry:                          |                      |
| IN OUT  | <ul> <li>Hands clean and properly washed</li> </ul>                    |  |  |                                       |                       | IN OUT Consume |                       |  | undercook   | advisory provided for raw or<br>ed food    |                                |                      |
| IN OUT  | IN OUT No bare hand contact with ready-approved alternate method prope |  |  |                                       | Ť                     |                |                       |  | igelly Susceptible Pr   |  |                                |                      |
|   | DUT  | Adequate ha  | ndwashing facilities                           | supplied &                            |                       |                | DUT N                 | N/O N/A  |   | d foods used, prohi                        |                                |                      |
|   |  | accessible   | Auproved Scar                                  | dis:                                  |                       |                |                       |  |   | Cherika                                    |                                |                      |
|   | TUC  | Food obtaine   | ed from approved so                            | urce                                  |                       | IN             | OUT                   |  | Food addit  | ives: approved and stances properly ide    | properly used                  |                      |
|   | N/A  |  |  |                                       |                       |                |                       | OUT  | used  |  |                                |                      |
|   | OUT Food in good condition, safe a                                     |  | l condition, safe and<br>ords available: shell | unadulterated<br>stock tags, parasite | .                     | IN OUT COmpl   |                       |  | Compliano   | mismance with Approved Procedures          |                                |                      |
| IN OUT N/6  |  | destruction  | ioteolon Iron Coma                             | eneriation                            |                       | +              |                       | 1,000  | and HACC  | P plan                                     |                                | 11                   |
| IN CET  | N/A  | ************************   | led and protected                              |                                       |                       |                | letter to             | the left of  | f each item i   | ndicates that item's                       | status at the time             | of the               |
| ■ OUT   | N/A  | Food-contact   | t surfaces cleaned &                           | sanitized                             |                       |                | IN = in               | complianc  |   | OUT = not in co                            |                                |                      |
| IN OUT Proper disposition of returned, pre                                      |  | eviously served,   | l N  | /A = no                               | t applicabl           | e              | N/O = not abse        | ervea  |   |  |                                |                      |
|   |  |  |  | T)                                    | DOD SETAL             | PRAGI          | ICES                  |  |   |  |                                |                      |
| IN OUT  | (:····   | Good Retail P  | ractices are prevent                           | ative measures to c                   | ontrol the intro      | duction        | of path               | ogens, ch  | emicals, and  | physical objects in<br>the Use of Use sits | to foods.                      | COS R                |
| X   | Paste  | urized eggs us   | ed where required                              |                                       |                       | ×              |                       | In-use u   | tensils: prob   | erly stored<br>and linens: properly        |                                |                      |
| ×   |  |  | approved source                                |                                       |                       | ×              |                       | handled  |   |  |                                |                      |
| ×   |  |  | : Temperature Conti                            |                                       |                       | ×              |                       | Gloves   | used properl  | rvice articles: prope<br>y                 |                                |                      |
| x   | Appro  | Adequate equipment for temperature co<br>Approved thawing methods used |  |                                       |                       | Fo             |                       |  | Maxials Equipment and Vending dans of the second section of the second section of the second |  | ndina:                         |                      |
| ×   | Therm  |  | ded and accurate                               |                                       |                       | ×              |                       | designe  | d. constructe   | ed, and used                               |                                |                      |
|   |  |  | Food Identification                            |                                       |                       | ×              |                       | strips us  | sed   | es: installed, mainta                      | uned, used; test               |                      |
| ×   | Food   | oropedy labele   | d; original container                          | 1251.30                               |                       | ×              |                       | HISH IIII  |   | hysical Facilities                         |                                |                      |
| ×   | Insects, rodents, and animals not present                              |  | t  |                                       | X Hot and cold wate   |                |                       | cold water a   | available; adequate   | pressure                                   |                                |                      |
| ×   | and display  |  |  |                                       | × Płumbing installed; |                |                       |  |   |  |                                |                      |
| Personal cleanliness: clean outer clothing fingernails and jewelry              |  | g, hair restraint,   |  | ×                                     |                       |                |                       |  |   |  |                                |                      |
| Wiping doths: properly used and stored  |  |  | -  |                                       | I X                   |                |                       | Toilet facilities: properly constructed, supplied, deaned<br>Garbage/refuse properly disposed; facilities maintained |   |  |                                |                      |
| ×   |  |  |  |                                       |                       | 1x             |                       |  | I facilities ins  | stalled, maintained.                       | and clean                      |                      |
| Person in C   | narge /T   | itle:Tamm  | ny Cornett                                     | Jan                                   | 22.44                 | ( nr           | we.                   | 11   | Da  | ote: 05/12/20                              | 021                            |                      |
| Inspector:  | 11   | 1.   | 111  | A non                                 | phone No.             |                | ===                   | EPHS N   | o. Fo   | llow-up: [                                 | Yes                            | ☐ No                 |
| 1 /   | he   | 10/1   | 1111   | 5/3                                   | -888-9008             | ·              |                       | 1647   |   | llow-up Date:                              |                                | E6.                  |



## MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BUREAU OF ENVIRONMENTAL HEALTH SERVICES

FOOD ESTABLISHMENT INSPECTION REPORT

TIME IN 1100 TIME OUT 1215

PAGE 2 of 2

| ESTABLISHMEI<br>DOLLAF | NT NAME<br>R TREE  | 1730 FIRST STRE   | CITY/ZIP<br>KENNETT, MO                                      | ZIP<br>NNETT, MO 63857       |                        |              |  |
|------------------------|--|---|--|------------------------------|------------------------|--------------|--|
|                        | OOD PRODUCT/LOCATION   | TEMP. in ° F  | FOOD PRODUCT/  | LOCATION                     | TEMP.                  | TEMP. in ° F |  |
|                        | DAIRY COOLER   | 34  |  |                              |                        |              |  |
|                        | FREEZER  | -4  |  |                              |                        |              |  |
|                        | WALK IN FREEZER  | 21  |  |                              |                        |              |  |
|                        | WALK IN COOLER   | 38  |  |                              |                        |              |  |
| Cate                   |  | PRINCIPL  | TEMS   |                              | Specifie)              | an dist      |  |
| Reference              | Priority items contribute directly further injury. These items MUST RECE | e elimination, prevention or reduction<br>IVE IMMEDIATE ACTION within 7 | n to an acceptable leve , hazards a<br>2 hours or as stated. | ISSOCIATED AVITA TOGO XVI 76 |                        |              |  |
| 3-302.11               | Pudding next to and stack  | on top of whole shell egg   | gs   |                              | cos                    | 170          |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
| Code<br>Reference      | Core terms relate to general sanitati                                    | COREIT  | structures lequipment design dens                            | ns) maintenance or sanita    | Coredby<br>tion (cate) |              |  |
|                        | is andard operating procedures (850                                      | Ps. These items are to baccorise  | ted by the next regular inspect                              | on or as stated.             |                        |              |  |
| 2 2 2 4 4              | Dana and faced in well in a  | ander Iraan annorated an  | d area labolad as parsar                                     | nal                          | CIP                    | Te           |  |
| 3-307.11<br>6-501.16   | Personal food in walk in c<br>Repeat: Mops laying in me                  |   |  | ıaı                          | NRI                    | TIC          |  |
| 3-50 1, 10             | Repeat. Wops laying in the   | op sink, shall be hang to t   | mow thom to all dry  |                              | .,,,,,                 | 1            |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        | -            |  |
|                        |  |   |  |                              |                        | -            |  |
|                        |  |   |  |                              |                        |              |  |
| CIP                    | Correction in progress   |   |  |                              |                        |              |  |
| COS                    | Corrected onsite   |   |  |                              |                        |              |  |
| NRI                    | Next Routine Inspection  |   |  |                              |                        |              |  |
| 21.31                  | TOXETTOWNTO HISPORIUM  |   |  |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  | EDUCATION PROV  | IDED OR COMMENTS   |                              |                        |              |  |
|                        |  |   |  |                              |                        |              |  |
|                        |  |   |  | 15.                          |                        |              |  |
| Person in C            | harge /Title: Tammy Corne  | tt Lammy  | Cornett  | Date: 05/                    | 12/2021                |              |  |
| Inspecto               | 10,00  | 7 Telephone No  | ). EPHS No.  | Follow-up:                   | Yes                    | ☐ No         |  |
| MO 580-1               | Sheephold flee   | 573-888-900   |  | Follow-up Da                 | ate:                   | E6.37A       |  |