

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

TIME IN 915			TIME OUT 115	
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NEXT POLITIME	INSPEC	CTION OR SU	CHISHORTER PER	NOD OF TIME	AS MAY E	BE SPECI	FIED IN	I WRI	TING BY T	HE REG	FACILITIES WHICH BULATORY AUTHOR DIOPERATIONS.	RIIY. F#	AILURE TO	CTED E	3Y THE 'LY
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT ESTABLISHMENT NAME: CLARKTON PUBLIC SHCOOL CLARKTON PUBLIC SHCOOL										Dawn St	Dawn Smart				
ADDRESS: HWY 162					COL			COUNTY: 0	69						
CITY/ZIP: CLARKTON, MO 63837 PHONE: 573-448-3712					FAX: P.H. PRIORITY: H M] L						
ESTABLISHMEN BAKERY RESTAU		C. STOR	E CATERER	R CENTER C	DELI SUMME	R F.P.		ROCE	ERY STORE		INSTITUTION TEMP.FOOD		MOBILE \	/ENDOI	RS
PURPOSE Pre-openi	ing	Routine	☐ Follow-up	☐ Complair	nt 🔲 (Other									
FROZEN DE	☐ Disa		SEWAGE DISP PUBLIC	OSAL PRIV	/ATE		ER SU COMM				COMMUNITY Sampled	-	PRIVATI Results		
License No. NA	4			FASA	FACTO	er and	Miles	VEN	TIONS	11 : : : 11 ' 11					
Risk factors at	re fond r	reparation pra-	ctices and employee	e behaviors mo	st commo	nly reporte	ed to the	e Cent	ters for Dise	ase Co	ntrol and Prevention				
foodborne illnes Compliance	ss outbre	asks Public h	ealth interventions lemoistration of Kri	are centrol ma	∍asures to :	orevent fo	odborn	e illne pliance	ss or injury.		Totalially Hazard				OS R
	TUC	Person in cha	arge present, demor : duties	nstrates knowle	edge,		a 0	OUT N/O N/A Proper cooking, time and temperature							
	OUT		awareness; policy	tesant			IN O		and the same of th		reheating procedure cooling time and ten				
	OUT	Proper use of	recorting, restrictio	n and exclusio	n			UT	N/O N/A	Proper	hot holding tempera	tures			
OUT	N/O	Proper eating	Good Hydlenic Pra tasting, drinking o	r tobacco use			0	OU"	N/O N/A	Proper	date marking and dis	sposition			
■ OUT	N/O		from eyes, nose an				IN O	UT :	N/O N	records					
■ OUT	N/O	Hands clean and properly washed					IN OUT Consumer			ner advisory provide	r advisory provided for raw or				
OUT	N/O		d contact with ready-		-		Undergooked rood								
			ernate method propendwashing facilities				OUT N/O N/A Pasteurized foods used, prohibited foods not								
	OUT Adequate harrowashing racindes supplied a accessible Approved Source				offered Chiehacal.										
	OUT Food obtained from approved source				OUT N/A Food additives: approved and properly used Toxic substances properly identified, stored and				-						
N OUT N/A Food received at proper temperature			_	-		OUT	used	nformainds with Abor							
N OUT N/O Required records available: shellstock tags, parasite destruction					OUT N/A Compliance with approved Specialized Process and HACCP plan										
OUT	N/A	TITLE THE PERSON NAMED IN	rolection Iron Conta ed and protected	militrical Call		_				each ite	m indicates that item	i's status	at the time	e of the	
OUT	Conditional State of					inspection. IN = in compliance OUT = not in compliance									
IN OUT	Proper disposition of returned previously served			d,		N/	4 = no	t applicable	1	N/O = not at	served				
					GOOD	RETALL	RACI	CES					.1_		
IN OUT		Good Retail Pi	actices are prevent te Food and Water	ative measures	to control	the introd	IN IN	or pati	nogens, che	micals,	and physical objects Proper Use of Utens	into idoi	US.	cos	R
X	Paster	ırized eggs use	ed where required				X		I in-use uto	ensiis: D	roperly stored ent and linens: prope			-	-
×						handled		service articles: properly stored, used			-				
×			Temperature Contr for temperature cor				X		Gloves us	sed oron	serly				
×		royed thawing methods used					x		Food and	od and nonfood-contact surfaces deanable, properly			-		
×	Food (Sentification					X		Warewas	designed, constructed, and used Warewashing facilities: installed, maintained, used; test			1	+		
×		Food properly labeled; original container				X		Nonfood-	strips used Nonfood-contact surfaces dean						
		Prevention of Food Contamination				x				Physical Facilities			<u></u>	-	
×	Insects rodents, and animals not present Contamination prevented during food preparation, storage				×	Plumbian installed: proper backflow devices									
×	and display Personal deanliness: clean outer clothing, hair restraint,				×	X Sewage and wastewater properly disposed									
×	fingernals and jewelry Wiping doths: properly used and stored				×				roperly constructed, a						
×	Person in Charge /Title: pawn Smart Our Mc					x			facilities	installed, maintained	d, and d	ean			
Person in Ch	arge /T	nte: Dawn	Smart	Day	1 300	10		1.0			Date: 02/10/2				
Inspector:		///	DIC		Telephone 73-888	e No. -9008			EPHS No 1647		Follow-up: Follow-up Date:		Yes	v	No
_//	ne	por 1	100	CISTRIBUTION					CANARY - FIL		. July 10 all marror				E6.37



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ESTABLISHMEN CLARKT	ON PUBLIC SHCOOL	ADDRESS HWY 162	CITY	RKTON, MO 63837			
	OD PRODUCT/LOCATION	TEMP, in ° F	FOOD PRODUCT/ LOC	FOOD PRODUCT/ LOCATION			
	Dairy Cooler	35		185			
		Scallop Potatoes/Warmer		mer	181		
	Dishwasher	Not Working			1		
	WALK IN COOLER	37					
	Walk In Freezer	10 PRIORITY	True 3 Door		35 Corrector I final		
Cocke Reference	Promy Rems distribute disertly suche e or many. These hams MUST RECEIVE	dimination prevention is reducted	nito an acceptable le rei, hazards associ	area with footborne lines.	(risté)		
Gode Reference	Core term relate to general sentiation.	CORETT Derai chai Controls facilities or	EMS structures, equipme 11 design general m ofert by the next regular vispacifion or	sintenance or saniation as stated.	Cornect by (care)	Indial	
6-501.16	Mops laying in bucket, hang	mops to allow them to	properly air dry	A SOUTH OF THE PARTY OF THE PAR	COS	10.16	
3-501.13	Improper thawing of prepact	EDUCATION PROX	ADED OR COMMENTS	it week	cos 7	745	
		er not working, using 3 vat sink untill dis	survasuer is used, being replaced within the ries				
Person in C	Date: 02/10/2	022					
Inspector:	harge /Title: Dawn Smart	Telephone No. 573-888-90	o. EPHS No. 1647	Follow-up:		☑ No E6.37A	