

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

| TIME IN 1330 | | | TIME OUT 1430 | | |
|--------------|---|----|---------------|--|--|
| PAGE | 1 | af | 2 | | |

| 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. | | | | | | | | | | | | | |
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| ESTABLISHMENT NAME: OWNER: Southern Sno (Mobile) Dave & Cir | | | | dy Henderson | | | | | CindvHeno | PERSON IN CHARGE: CindvHenderson | | | |
| ADDRESS: 401 E Second St | | | | | | | | | COUNTY: Dur | COUNTY: Dunklin | | | |
| CITY/ZIP: Kennett, MO | | | PHONE: 344-1658 | | | FAX: | | | P.H. PRIORITY | : ПнП | М | L | |
| PURPOSE | | | | MER F.P. | | | | | | | S ——— | | |
| □ Pre-opening ■ Routine □ Follow-up □ Complaint □ Other FROZEN DESSERT SEWAGE DISPOSAL WATER SUPPLY | | | | | | | | | | | | | |
| □ Approved □ Disapproved □ PUBLIC □ PRIVATE □ COMMUNITY □ NON-COMMUNITY □ PRIVATE □ Date Sampled □ Results □ Results □ Disapproved □ Disapproved □ Disapproved □ PRIVATE □ Date Sampled □ Disapproved □ Disapproved □ PRIVATE □ Date Sampled □ Disapproved □ Disa | | | | | | | | _ | | | | | |
| License No 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 | 5 001016 | i i | tempostration of Kno | wiedge | COS F | | mpliance | | | Pojatika y Hazardala | Foods | COS | R |
| OUT Person in charge present, demonstrates knowledge, and performs dulles | | | | | | N/O N/A Proper cocking, time and temperature | | | | | | | |
| Ol | JT | Management | Employee Healt Lawareness; policy pi | resent | | | IN OUT NO N/A Proper reheating procedures for hot holding IN OUT NO N/A Proper cooling time and temperatures | | | | | | |
| | JT | | f reporting, restriction Good Hygienic Prac | and exclusion | | OUT N/O N/A Proper hot holding temperatures OUT N/A Proper cold holding temperatures | | | | | | | |
| OUT | N/O | | , tasting, drinking or | tobacco use | | iN | | N/O N/A | Proper o | ata marking and dispos | ition | | |
| ■ OUT | N/O | No discharge from suce more and mouth | | | | IN | records) | | | | | | |
| ■ OUT | N/O | Proventing Contain Indian by Hands Hands clean and properly washed | | | | IN | IN OUT Consumer advisory provided for raw or | | | | | | _ |
| No bare hand contact with ready-to-eat foods or | | | | | | undercooked food Highlig Businephiste Populations | | | | | + | | |
| approved alternate melnod properly followed CUT Adequate handwashing facilities supplied & | | | | iN | IN OUT N/O Pasteurized foods used, prohibited foods not offered | | | ted foods not | | | | | |
| | | accessible | Approved Sounc | * | | Cžieniicai. | | | | | | | |
| OUT Food obtained from approved source | | | | | IN | OUT | JT N Food additives: approved and properly used OUT Toxic substances properly identified, stored and | | | | + | | |
| IN OUT THE TOTAL | | | | | 9. | Used Conformance with Approved Procedures | | | | | - | | |
| IN OUT Food in good condition, safe and unadulterated IN OUT N/O Required records available: shellstock tags, parasite destruction | | | | | IN | Compliance with approved Specialized Process | | | | | | | |
| | | | idle slick Nort Contain | rimation | | 1 | | | | | | -54b- | |
| OUT N/A Food separated and protected | | | | | The letter to the left of each item indicates that item's status at the time of the Inspection. | | | | | | | | |
| Proper disposition of returned previously served | | | | | IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed | | | | | | | | |
| OUT N/O reconditioned, and unsafe food GOOD RETAIL PRACTICES | | | | | | | | | | | | | |
| Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods. | | | | | | | | | | | | | |
| IN OUT | | | 1711305001-0582251000 | | cos R | IN | OUT | | | roper Use of Utensis | | CDS | R |
| Pasteurized eggs used where required Water and ice from approved source | | | | × | In-use utensils: properly stored Utensils, equipment and linens: properly stored, dried, | | | | | | | | |
| Fixed "Princerature Calaire | | | | × | | handled Single-use/single-service articles: properly stored, used | | | | | | | |
| X Adequate equipment for temperature control | | | | X | | Gloves (| used prope | erly | | | | | |
| X Approved thawing methods used Thermometers provided and accurate | | | | × | Utansals Fourancem and Vending Food and honfood-contact surfaces cleanable, properly | | | | | | | | |
| X The morning is provided and according | | | | × | | designed, constructed, and used Warewashing facilities: installed, maintained, used; test | | | | | | | |
| X Food properly labeled; original container | | | | | | strips us Nonfood | -contact s | urfaces clean | | | | | |
| Prevention of Good Contamination | | | | | - U | | اسم فوال | opld wee- | Physical Facilities r available; adequate pr | acciire | | | |
| X Insects, rodents, and animals not present X Contamination prevented during food preparation, storage | | | | | × | | | | r avallable; adequate pr ; proper backflow devic | | | | |
| and display Personal cleanliness: clean outer clothing, hair restraint, | | | | | × | | Sewage and wastewater properly disposed | | | | | | |
| fingernalis and jewelry Wiping cloths: properly used and stored | | | | | × | | Toilet facilities: properly constructed, supplied, cleaned | | | - | | | |
| X Fruits and vegetables washed before use | | | | | X | | Garbage/refuse properly disposed; facilities maintained | | | | | | |
| Person in Charge /Title: | | | | | | | | | | | | | |
| Person in Charge /Title: CindyHenderson (encly for the phone No. EPHS No. Follow-up: Yes V No. | | | | | | | | | | | | | |
| Inspector: Telephone No. 573-888-9008 EPHS No. Follow-up: Yes Follow-up Date: | | | | | | ✓ N | | | | | | | |
| MO 580-1-14 12-16 | MO 580-14/4 DISTRIBUTION: WHITE - OWNER'S COPY CANARY - FILE COPY E5.37 | | | | | | | | | | | | |



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| ESTABLISHMEN Southerr | n Sno (Mobile) | ADDRESS 401 E Second St | city/zip Kenne | tt, MO |
|--------------------------|------------------------------------------|-----------------------------------------------------------|--------------------------------------------------------------------------|-------------------------------------|
| | Refrigerator Hot Dogs/Warmer | TEMP. in ° F 36 185 | FOOD PRODUCT/LOCATIO | N TEMP. in ° F |
| Code Reference | Priority items contribute directly to it | PRIORITY IT: na a iffiliable a prayention of raduction | MS o àn accaptable level, hazards ascacialed h cours or as stated. | Correct by initial |
| 3-501.17 | Hotdog package opened all read | dy to eat food must have 7 day dis | card date | cos |
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| Code Reference | Constant real property suitable | CORE ITEM | S Jokus, equipment design, general maintens | Correct by Linkal |
| | stanidard operating procedures (55) | Ps). These items are to be correcte | d by the next regular inspection of as sta | ted. |
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| cos | Corrected onsite | | | |
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| | | EDUCATIONIPROVID | ED OR COMMENTS | |
| | | 1 | 1 | |
| | harge /Title: CindyHenders | | | Date: 07/27/2020 |
| Inspector | Ugill IN | Telephone No. 573-888-9008 | EPHS No. F 1647 F | ollow-up: Yes INo ollow-up Date: |