



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

TIME IN	1130	TIME OUT	1330
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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: Lupitas Mexican Resaurant	OWNER: George Mendoza	PERSON IN CHARGE: George Mendoza
ADDRESS: 1009 St Francis	CITY/ZIP: Kennett, MO 63857	COUNTY: 069
PHONE: 573-263-2086	FAX:	P.H. PRIORITY: <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> 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
 Date Sampled _____ Results _____
 License No. **NA**

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			IN OUT <input checked="" type="checkbox"/> N/A	Proper cooking, time and temperature		
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			IN OUT <input checked="" type="checkbox"/> N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> OUT N/O N/A	Proper cooling time and temperatures		
IN OUT <input checked="" type="checkbox"/>	Good Hygienic Practices			IN <input checked="" type="checkbox"/> OUT N/A	Proper hot holding temperatures		
IN OUT <input checked="" type="checkbox"/>	Proper eating, tasting, drinking or tobacco use			<input checked="" type="checkbox"/> OUT N/O N/A	Proper cold holding temperatures		
IN OUT <input checked="" type="checkbox"/>	No discharge from eyes, nose and mouth			IN OUT N/O <input checked="" type="checkbox"/>	Proper date marking and disposition		
<input checked="" type="checkbox"/> OUT N/O	Prevention of Contamination by Hands				Time as a public health control (procedures / records)		
<input checked="" type="checkbox"/> OUT N/O	Hands clean and properly washed			<input checked="" type="checkbox"/> OUT N/A	Consumer advisory		
IN OUT <input checked="" type="checkbox"/>	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Consumer advisory provided for raw or undercooked food		
<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			<input checked="" type="checkbox"/> OUT N/O N/A	Highly Susceptible Populations		
<input checked="" type="checkbox"/> OUT	Approved Source				Pasteurized foods used, prohibited foods not offered		
IN OUT <input checked="" type="checkbox"/> N/A	Food obtained from approved source			<input checked="" type="checkbox"/> OUT N/A	Chemicals		
IN OUT <input checked="" type="checkbox"/> N/A	Food received at proper temperature			IN <input checked="" type="checkbox"/> OUT	Food additives: approved and properly used		
IN <input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				Toxic substances properly identified, stored and used		<input checked="" type="checkbox"/>
IN OUT N/O <input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			IN OUT <input checked="" type="checkbox"/>	Compliance with Approved Procedures		
IN <input checked="" type="checkbox"/> OUT N/A	Food separated and protected				Compliance with approved Specialized Process and HACCP plan		
<input checked="" type="checkbox"/> OUT N/A	Food-contact surfaces cleaned & sanitized						
<input checked="" type="checkbox"/> OUT N/O	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/O = 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	
X		Adequate equipment for temperature control			X		Single-use/single-service articles: properly stored, used		
X	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 identification			X		Warewashing facilities: installed, maintained, used; test strips used		
X		Food properly labeled: original container			X		Nonfood-contact surfaces clean		
X		Insects, rodents, and animals not present			X		Physical Facilities		
X	X	Contamination prevented during food preparation, storage and display	X		X		Hot and cold water available: adequate pressure		
X		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			X		Plumbing installed; proper backflow devices		
X	X	Wiping cloths: properly used and stored	X		X		Sewage and wastewater properly disposed		
X		Fruits and vegetables washed before use	X		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: **George Mendoza** Date: **11/03/2021**
 Inspector: *[Signature]* Telephone No. **573-888-9008** EPHS No. **1647**
 Follow-up: Yes No
 Follow-up Date: _____



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ESTABLISHMENT NAME Lupitas Mexican Resaurant		ADDRESS 1009 St Francis		CITY / ZIP Kennett, MO 63857	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/LOCATION		TEMP. in ° F
Walk in Cooler		40	2 Door Cooler		39
True Prep		36			
Tomatoes/True Prep		37			
Beef/Wamer		168			
Chicken/Warmer		171			

Code Reference	PRIORITY ITEMS Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.	Correct by (date)	Initial
3-501.16B	Opened jar of jalepenos on countertop at room temp, must refrigerate after opening	COS	Jm
7-201.11	Oven cleaner on shelving above dishes	COS	Jm
4-601.11A	top dishes on shelving soiled from dry goods above, food contact surfaces shall be protected from contamination	COS	Jm

Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SOPs). These items are to be corrected by the next regular inspection or as stated.	Correct by (date)	Initial
4-601.11C	Fan soiled with dust and debris in kitchen	COS	Jm
6-501.12A	Shelving in kitchen on east wall soiled with food and debris, wash rinse and santizie	NRI	Jm
3-304.14	Wiping cloths not stored in sanitizer	COS	Jm

Approved for opening

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: George Mendoza		Date: 11/03/2021
Inspector: <i>[Signature]</i>	Telephone No. 573-888-9008	EPHS No. 1647
Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Follow-up Date: _____