

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

TIME IN 830			TIME OUT 1030
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MENT DOUTING INSPEC	TION THIS DAY, THE ITEMS NOTE CTION, OR SUCH SHORTER PER	OD OF TIME AS MAI	Y NONCON Y BE SPEC	IFIED I	N WRIT	TING BY T	HE REC	GULATORY	AUTHORI	TY. FAILURE TO	COMPL	Υ .Υ
ESTABLISHMENT N THE STORE	IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD C OWNER:					PE	PERSON IN CHARGE:					
		Rahim Kajani						Tresa Foster COUNTY: 069				
ADDRESS: 911 INDEPENDENCE AVE								_			-	_
CITY/ZIP: KENNE	PHONE: FAX: 573-888-9524			P.H	P.H. PRIORITY: H M L							
ESTABLISHMENT TYPE BAKERY RESTAURANT PURPOSE	C. STORE CATERER SCHOOL SENIOR C				ROCE	RY STOR		☐ INSTITU		■ MOBILE \	/ENDOR	S
Pre-opening	Routine 📕 Follow-up	Complaint	Other									
FROZEN DESSERT Approved Dis		SAL PRIVATE	1.00	TER SI COMM				COMMUN Sampled		☐ PRIVATE		
License No. NA		RISK FACT	ADQ ANIF	. EXPTES	AZENE	DONS.						*****
Risk factors are food r	preparation practices and employee	behaviors most comr	nonly repor	ted to th	e Cent	ers for Dis	ease Co	ontrol and P	revention a	s contributing fact	ors in	
foodborne illness outbre	eaks. Public health interventions a	ere control measures	to prevent t	oodbori	ne illnes npliance	s or injury				aus Piocidsi		S R
Compliance OUT	Descent in abarda present, demonstrates know			1		N/O N/A	Proper		me and tem			
501	and performs duties	(s				N/A	Proper	r reheating	procedures	for hot holding		
TUO	resent		IN OUT NO N/A Proper co					ne and temp				
OUT	Proper use of reporting restriction Good Hyslenic Prac	and exclusion		18 '	TUO	N/O N/A			g temperatu ng temperat			
OUT N/O	Proper eating, tasting, drinking or	tobacco use		OUT N/O N/A Proper dat				r date mark	ing and disp	osition ol (procedures /		
OUT N/Q	No discharge from eyes, nose and			IN OUT N/O I records)			8)			TOTAL		
	Hands clean and properly washed	by Hands		I IN	OLIT	_	Consu		nsumer Adv ry provided	isebry for raw or		
OUT N/O	No here hand contact with ready-to-eat foods or						cooked food Highly S	ced food lightly Susceptible Populations				
OUT N/O approved alternate method properly Adequate handwashing facilities sup		ly followed						rd foods used, prohibited foods not				
■ OUT	upplied &		OUI N/O N/A offered			d	: :Gilibracal					
OUT	Aproved Scirc			-	OUT	N/A				properly used		-
OUT Food obtained from approved source IN OUT N/A Food received at proper temperature				OUT Toxic subs				tances properly identified, stored and				
OUT	Food in good condition, safe and	ınadulterated	_	+ T			used Co	alkinnanca	with Appho	ved Procedures		
IN OUT N/O	tock tags, parasite					liance with ACCP plan		pecialized Proces	s			
Protection from Contamination OUT N/A Food separated and protected				The	letter to	the left of	f each ite	em indicate	s that item's	status at the time	e of the	
OUT N/A OUT N/A	senitized inspection. IN = in compliance				OL	OUT = not in compliance						
IN OUT	vicusly served, N/A = not applicable					N/	N/O = not observed					
IN GOT I	reconditioned, and unsafe food	666	M) RETAIL	PRACT	ICES							
	Good Retail Practices are preventa	live mossures to cont	rol the intro	duction	of nath	ogens, ch	emicals,	, and physic	al objects in	nto foods.	COS	R
IN OUT Paste	Safe From 850 Water urized eggs used where required	[]]]]]]]]]]]]]]]]]]]]]]]]]]]]]	OS R	X	OUT	i in-use u	tensiis. I	property stu	neu			
Water and ice from approved source				×		Utensils handled		nent and lin	ens: proper	y stored, dried,		
Food Temperature Contin				×		Single-u	se/single		rtides: prop	erly stored, used		
Adequate equipment for temperature con-		rol		X		Gloves	used pro	operly sals Faulor	wentama V≢	ndinti		
X Approved thawing methods used Thermometers provided and accurate				×		Food and nonfood-conta designed, constructed, a			surfaces de	anable, properly		
X Favor Carnon Fav			_		×	Warewa	shing fa			ained, used; test		
			-	×		strips us		t surfaces o	lean		1	
Prevention of Edet Contamination.								Physics	Paclitics e: adecuate	OLIZAGIE		
Insects, rodents, and animals not present Contamination prevented during food preparation, sto			_	×					e: adequate packflow de			
^ and di	isplay			1		Sewage	and wa	istewater or	operly dispo	osed	-	1
Personal cleanliness: clean outer clothing, hair restraint, fingernals and jewelry				×							-	
Wiping cloths: properly used and stored Fruits and vegetables washed before use				×		Garbage	/refuse	properly dis	sposed; faci	upplied, deaned lities maintained		
12				X		Physical	facilitie		maintained,			
Person in Charge /T	🆑 Tresa Foste 🕽 🦼	WY to	Tel	,				Date: 3/	9/202			
Inspector:	1,000	Telepho 573 00	one No. 38-9008			EPHS N 1647	0.	Follow-up	p:	☐ Yes	V	No
MO 580-18	TOR WIN	DISTRIBUTION: WHITE-				CANARY FI	LE GOPY	Follow-u	טמוני.			E6.37



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FOOD ESTABLISHMENT INSPECTION REPORT

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ESTABLISHMENT NAME THE STORE #2		911 INDEPENDE	NCE AVE	KENNETT, MC	CITY/ZIP KENNETT, MO 63857				
FOOD PRODUCT/LOCATION		TEMP. in ° F		UCT/ LOCATION	TEMP. in ° F	:			
Walk in cooler		34							
	Pizza Prep	37			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	_			
	Warmer/Fried Eggs	146			\				
	Warmer/Gravy	140			-				
Code Reference	Promy Remiss or moute streetly for or pury. These items MUST RECE	PRIORITY # elimination, prevention or recursing IVE IMMEDIATE ACTION within 72	TEMS Ato an acceptable level transmission and acceptable level transmission acceptable level transmission and acceptable level transmission acceptabl	rands associated with food bir his	Driess Carle)	bgl			
Code Reference	Cara forme robote in control son to	COREITI on, operational controls facilities of a (Pp) These illering are to be contex	dructures equipment design	garensi rijamena de orisa ilib pedi on prijas stated.	Coredby Ma				
4-302.14	No test kit for checking sa		IDED OR COMMENTS		3/9/22				
Person in Cl	harge /Title: Tresa Foster	Thou fist	て て	Date: 3/9/2	2022				