



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

TIME IN	930	TIME OUT	1015
PAGE 1 of 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.

ESTABLISHMENT NAME: LAS BRISAS	OWNER: GUSTABO MARQUEZ	PERSON IN CHARGE: Gustabo Marquez
ADDRESS: 1210 N DOUGLASS	CITY/ZIP: MALDEN, MO 63863	COUNTY: 069
PHONE: 573-276-6666	FAX:	P.H. PRIORITY: <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY <input type="checkbox"/> RESTAURANT <input type="checkbox"/> C. STORE <input type="checkbox"/> SCHOOL <input type="checkbox"/> CATERER <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> DELI <input type="checkbox"/> SUMMER F.P. <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> TAVERN <input type="checkbox"/> INSTITUTION <input type="checkbox"/> TEMP. FOOD <input type="checkbox"/> MOBILE VENDORS		
PURPOSE <input type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other		
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	SEWAGE DISPOSAL <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> 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	Compliance	Compliance	Compliance	COS	R	COS	R
<input checked="" type="checkbox"/> OUT	Person in charge present, demonstrates knowledge, and performs duties	IN	OUT	N/A			
<input checked="" type="checkbox"/> OUT	Management awareness, policy, present	IN	OUT	N/A			
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion	IN	OUT	N/A			
<input checked="" type="checkbox"/> OUT	Proper eating, tasting, drinking or tobacco use	IN	OUT	N/A			
<input checked="" type="checkbox"/> OUT	No discharge from eyes, nose and mouth	IN	OUT	N/A			
IN	OUT	N/A					
<input checked="" type="checkbox"/> OUT	Hands clean and properly washed	IN	OUT	N/A			
<input checked="" type="checkbox"/> OUT	No bare hand contact with ready-to-eat foods or approved alternate method properly followed	IN	OUT	N/A			
<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible	IN	OUT	N/A			
<input checked="" type="checkbox"/> OUT	Food obtained from approved source	IN	OUT	N/A			
IN	OUT	N/A					
<input checked="" type="checkbox"/> OUT	Food received at proper temperature	IN	OUT	N/A			
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated	IN	OUT	N/A			
IN	OUT	N/A					
<input checked="" type="checkbox"/> OUT	Required records available: shellstock tags, parasite destruction	IN	OUT	N/A			
<input checked="" type="checkbox"/> OUT	Food separated and protected	IN	OUT	N/A			
<input checked="" type="checkbox"/> OUT	Food-contact surfaces cleaned & sanitized	IN	OUT	N/A			
IN	OUT	N/A					
<input checked="" type="checkbox"/> OUT	Proper disposition of returned, previously served, reconditioned, and unsafe food	IN	OUT	N/A			

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

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

IN	OUT	Compliance	COS	R	IN	OUT	Compliance	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		Adequate equipment for temperature control			X		Single-use/single-service articles: properly stored, used		
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 properly labeled; original container			X		Warewashing facilities: installed, maintained, used; test strips used		
X		Insects, rodents, and animals not present			X		Nonfood-contact surfaces clean		
X		Contamination prevented during food preparation, storage and display			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		Wiping cloths: properly used and stored			X		Sewage and wastewater properly disposed		
X		Fruits and vegetables washed before use			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: Gustabo Marquez	Date: 03/10/2022
Inspector: <i>[Signature]</i>	Telephone No. 573-888-9008
EPHS No. 1647	Follow-up: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Follow-up Date:

