

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

TIME IN 1000 TIME OUT 1230

PAGE 1 of 2

VEXT ROUTINE INSPE	CTION THIS DAY, THE ITEMS NOTE CCTION, OR SUCH SHORTER PERI SEOR CORRECTIONS SPECIFIED	OD OF TIME AS MAY	BE SPEC	IFIED IN	↓WRITING BY 1	THE REGULA	ATORY AUTHORITY. FAILURE T	O COMPL	LY		
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT ESTABLISHMENT NAME: WALMART #453 WALMART, INC				IN OLDOWNIA TO SIXT GOD OF			PERSON IN CHARGE: Deshawn Williams, Coach				
ADDRESS: 1007 N. DOUGLASS							COUNTY: 069				
CITY/ZIP: MALDEN, MO 63863				FAX:			P.H. PRIORITY: H M L				
ESTABLISHMENT TYPE BAKERY C. STORE CATERER DELI RESTAURANT SCHOOL SENIOR CENTER SUMMER F.			ER F.P.	■ GROCERY STORE □ INSTITUTION □ MOBILE VENDORS □ TAVERN □ TEMP.FOOD							
PURPOSE Pre-opening Routine Follow-up Camplaint Other											
FROZEN DESSERT Approved Disapproved PUBLIC PRIVATE COMMUNITY NON-COMMUNITY 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 Kris	pledge :	COS R	Com	e inness or injur pliance		Patendally Hazardoxs Foods	co	S R		
OUT Person in charge present, demonstrates knowledge,				IN O	AVN CEN TU						
OUT Management awareness; policy present				_	OUT NO N/A						
OUT	Proper use of regorting, restriction	and exclusion			UT NO N/A	Proper hot	holding temperatures				
OUT N/O	Cood Hyclenic Prac	obacco use		IN O	The second second second	Proper dat	d holding temperatures e marking and disposition				
OUT N/O	No discharge from eyes, nose and			IN O	UT N/O 🖶	records)	public health control (procedures /				
OUT N/O	Hands clean and properly washed			IN	OUT N	Consumer	advisory provided for raw or				
	No hare hand contact with ready-to-eat foods or			1		undercooked food					
OUT N/O approved alternate method properly followed approved alternate method properly followed Adequate handwashing facilities supplied &				Pasteurized foods used, prohibited foods not					+		
- 001	accessible Approved Source	<u> </u>		- "	101 100 100	offered	onewa:				
■ OUT	Food obtained from approved sour	ce			OUT N/A		ives: approved and properly used tances properly identified, stored a				
IN DUT N/A Food received at proper temperature					OUT	used					
IN OUT N/O Required records available, shellstock tags, parasite destruction				IN	IN OUT Compliance with approved Specialized Process and HACCP plan						
	Protection from Contar	irriation		Tho I	atter to the left o	f each item i	adicates that item's status at the tin	ne of the			
OUT N/A Food separated and protected OUT N/A Food-contact surfaces cleaned & sanitized				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							
IN OUT IN reconditioned, and unsafe food GOOD RETAL BRACHICES											
	Good Retail Practices are preventat				of pathogens, ch	emicals, and	physical objects into foods.	9991 AAA	I n		
N OUT	Sate Food and Water eurized eggs used where required		8 R	IN X	In-use L	tensils: prop	rán Use of Ulansils. erly stored	008	K		
	r and ice from approved source			×	Utensils handled	, equipment	and linens: properly stored, dried,				
Food Temperature Control				×	Single-use/single-service articles: properly stored, used						
Adequate equipment for temperature control Approved thawing methods used				×		used properl	/ Edularientari Vendini:				
Thermometers provided and accurate				×	Food ar	d nonfood-c	ontact surfaces d'eanable, properly				
FAQU (Semilificianci)				×	Warewa	designed, constructed, and used Warewashing facilities: installed, maintained, used; test strips used					
X Food properly labeled; original container				x	Nonfood	t-contact sur	faces dean				
Prevention of Fig. Contemporation X Insects rodents, and animals not present				×	Hot and		Tysical Facilities vailable: adequate pressure				
Contamination prevented during food preparation, storage and display				×	Dhumbing installed: proper backflow devices						
Personal cleanliness: clean outer clothing, hair restraint. fingernails and jewelry				×	Sewage	and wastew	ater properly disposed				
Wiping doths: properly used and stored Fruits and vegetables washed before use			_	×			erly constructed, supplied, deaned perly disposed; facilities maintained				
				Î		facilities ins	talled, maintained, and dean				
Person in Charge /Title: Deshawn Williams, Coach Date: 03/15/2022											
Inspector: S73-888-9008 EPHS No. Follow-up: Yes No. No. Follow-up Date: Yes No. Follow-up Date: Personant No. Personant Pers											
MO 580-18 (L(F-13)	hus to beat	DISTRIBUTION: WHITE- OV	VNER'S COPY	1	CANARY - F	ILE COPY			E6.37		



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

TIME IN 1000	TIME OUT 1230		
PAGE 2 of	2		

ESTABLISHMENT NAME WALMART #453		1007 N. DOUGLAS	SS MALDEN, M	MALDEN, MO 63863			
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F			
ICE CREAM DISPLAY		-9					
DELI DISPLAY		35					
DAIRY COOLER		36					
PIZZA/ FREEZER		-10					
Code	WALK IN COOLER	40 ppi/pity/1	TEMS	Cornect by I limite			
Code	or navy. These items MUST RECE	CORETTE CORETTE CORETTE CORETTE		Correct by Indias			
COS NRI	CORRECTED ONSITE NEXT ROUTINE INSPECTIO						
	1	EDUCATION PROVI	DED OR COMMENTS:				
)				
Person in Charge /Title: Deshawn Williams, Coach							
Inspector	In tela Oliva	Telephone No 573-888-900 DISTRIBUTION WHITE- DANNER'S COR	. EPHS No. Follow-up 08 1647 Follow-up	: Yes 🗹 No			