



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

TIME IN 1200	TIME OUT 1400
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: Kennett Bowling Lanes, LLC	OWNER: KBL Real Estate	PERSON IN CHARGE: Johnny Arenas
ADDRESS: 1315 St Francis St		COUNTY: Dunklin
CITY/ZIP: Kennett, MO 63857	PHONE: 573-888-9400	FAX:
P.H. PRIORITY: <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L		

ESTABLISHMENT TYPE <input checked="" type="checkbox"/> BAKERY <input checked="" 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 checked="" type="checkbox"/> Routine <input 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
License No. _____	Date Sampled _____	Results _____

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	Item	COS	R	Compliance	Item	COS	R
<input checked="" type="checkbox"/>	OUT			IN	OUT	N/A	
	Person in charge present, demonstrates knowledge, and performs duties			IN	OUT	N/A	
<input checked="" type="checkbox"/>	OUT			IN	OUT	N/A	
	Management awareness: policy present			IN	OUT	N/A	
<input checked="" type="checkbox"/>	OUT			IN	OUT	N/A	
	Proper use of reporting, restriction and exclusion			IN	OUT	N/A	
<input checked="" type="checkbox"/>	OUT	N/A		IN	OUT	N/A	
	Good Hygienic Practices			IN	OUT	N/A	
<input checked="" type="checkbox"/>	OUT	N/A		IN	OUT	N/A	
	Proper eating, tasting, drinking or tobacco use			IN	OUT	N/A	
<input checked="" type="checkbox"/>	OUT	N/A		IN	OUT	N/A	
	No discharge from eyes, nose and mouth			IN	OUT	N/A	
<input checked="" type="checkbox"/>	OUT	N/A		IN	OUT	N/A	
	Prevention of Contamination by Hands			IN	OUT	N/A	
<input checked="" type="checkbox"/>	OUT	N/A		IN	OUT	N/A	
	Hands clean and properly washed			IN	OUT	N/A	
IN	OUT			IN	OUT	N/A	
	No bare hand contact with ready-to-eat foods or approved alternate method properly followed			IN	OUT	N/A	
<input checked="" type="checkbox"/>	OUT			IN	OUT	N/A	
	Adequate handwashing facilities supplied & accessible			IN	OUT	N/A	
<input checked="" type="checkbox"/>	OUT			IN	OUT	N/A	
	Approved Source			IN	OUT	N/A	
IN	OUT			IN	OUT	N/A	
	Food obtained from approved source			IN	OUT	N/A	
<input checked="" type="checkbox"/>	OUT			IN	OUT	N/A	
	Food received at proper temperature			IN	OUT	N/A	
<input checked="" type="checkbox"/>	OUT			IN	OUT	N/A	
	Food in good condition, safe and unadulterated			IN	OUT	N/A	
IN	OUT			IN	OUT	N/A	
	Required records available: shellstock tags, parasite destruction			IN	OUT	N/A	
<input checked="" type="checkbox"/>	OUT	N/A		IN	OUT	N/A	
	Prevention of Food Contamination			IN	OUT	N/A	
<input checked="" type="checkbox"/>	OUT	N/A		IN	OUT	N/A	
	Food separated and protected			IN	OUT	N/A	
<input checked="" type="checkbox"/>	OUT	N/A		IN	OUT	N/A	
	Food-contact surfaces cleaned & sanitized			IN	OUT	N/A	
IN	OUT			IN	OUT	N/A	
	Proper disposition of returned, previously served, reconditioned, and unsafe food			IN	OUT	N/A	

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.							
IN	OUT	Item	COS	R	IN	OUT	Item
<input checked="" type="checkbox"/>		Pasteurized eggs used where required			<input checked="" type="checkbox"/>		In-use utensils: properly stored
<input checked="" type="checkbox"/>		Water and ice from approved source			<input checked="" type="checkbox"/>		Utensils, equipment and linens: properly stored, dried, handled
<input checked="" type="checkbox"/>		Food Temperature Control			<input checked="" type="checkbox"/>		Single-use/single-service articles: properly stored, used
<input checked="" type="checkbox"/>		Adequate equipment for temperature control			<input checked="" type="checkbox"/>		Gloves used properly
<input checked="" type="checkbox"/>		Approved thawing methods used			<input checked="" type="checkbox"/>		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used
<input checked="" type="checkbox"/>		Thermometers provided and accurate			<input checked="" type="checkbox"/>		Warewashing facilities: installed, maintained, used; test strips used
<input checked="" type="checkbox"/>		Food Labeling			<input checked="" type="checkbox"/>		Nonfood-contact surfaces clean
<input checked="" type="checkbox"/>		Food properly labeled: original container			<input checked="" type="checkbox"/>		Physical Facilities
<input checked="" type="checkbox"/>		Insects, rodents, and animals not present			<input checked="" type="checkbox"/>		Hot and cold water available: adequate pressure
<input checked="" type="checkbox"/>		Contamination prevented during food preparation, storage and display			<input checked="" type="checkbox"/>		Plumbing installed; proper backflow devices
<input checked="" type="checkbox"/>		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input checked="" type="checkbox"/>		Sewage and wastewater properly disposed
<input checked="" type="checkbox"/>		Wiping cloths: properly used and stored			<input checked="" type="checkbox"/>		Toilet facilities: properly constructed, supplied, cleaned
<input checked="" type="checkbox"/>		Fruits and vegetables washed before use			<input checked="" type="checkbox"/>		Garbage/refuse properly disposed; facilities maintained
<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>		Physical facilities installed, maintained, and clean

Person in Charge / Title: Johnny Arenas	Date: 06/28/2022
Inspector: <i>Charles D. Smith</i>	Telephone No. 573-888-9008
EPHS No. 1647	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Follow-up Date: _____

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

TIME IN 1200	TIME OUT 1400
PAGE of 2	

ESTABLISHMENT NAME		ADDRESS		CITY / ZIP	
Kennett Bowling Lanes, LLC		1315 St Francis St		Kennett ,MO 63857	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Deli Prep		36			
Atosa-1		-1			
Walk in Cooler		38			
Coke Cooler		38			
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.					
Code Reference	Opened hotdogs in Atosa cooler not dated, shall be dated with 7day discard date				COS JA
CORE ITEMS Core items relate to general sanitation, operational controls, facilities, equipment, and other factors that are fundamental to a food safety standard. Core items are to be corrected by the next regular inspection or as stated.					
Code Reference	Floors soiled with food and debris behind bar				CIP JA
Code Reference	No test kit for checking sanitizer in kitchen				CIP JA
COS	Corrected onsite				
EDUCATION PROVIDED OR COMMENTS:					
Person in Charge /Title: Johnny Arenas Date: 06/28/2022					
Inspector: [Signature]		Telephone No. 573-888-9008		EPHS No. 1647	
				Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
				Follow-up Date:	