

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

TIME IN			TIME OUT		
PAGE	1	of			

NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD C WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THE ESTABLISHMENT NAME:				IN THIS NOTICE OWNER:	MAY RE	SPEC	IN CE	SSATIC	N OF YO	UR FOO	DD OPERATIONS. PERSON IN CHARC		JOINIPL	T
ADDRESS:										COUNTY:				
CITY/ZIP: PHONE:						FAX:				P.H. PRIORITY :	H	M	L	
ESTABLISHMEN	T TVDE										1 1			
BAKERY		C. STOR			ELI	- D			RY STOR	E		MOBILE VE	ENDORS	S
RESTAUI PURPOSE	RANI	SCHOO	L SENIOR C	ENTER SU	JMMER	F.P.	l	AVERN	1		TEMP.FOOD			
Pre-openi	ing	Routine	Follow-up	Complaint	Oth	ner								
FROZEN DE Approved		approved	SEWAGE DISPO PUBLIC	SAL PRIVAT	F			UPPL)		NON-	COMMUNITY	PRIVATE		
License No.			. 622.6		_						Sampled	Results_		
				RISK FA	CTORS	AND	INTE	RVEN	TIONS					
											ontrol and Prevention as contrib	outing facto	rs in	
Compliance	ss outbre		ealth interventions		res to pre			mpliance		/. [Potentially Hazardous Foo	de	COS	S R
	DUT	Demonstration of Knowledge Person in charge present, demonstrates knowledge,				, I.	+		N/O N/A	Prope	er cooking, time and temperatur			<u></u>
	JU1	and performs duties												
IN C	DUT	Management	Employee Healt t awareness; policy p						N/O N/A		er reneating procedures for not er cooling time and temperature		+-	+
	DUT		f reporting, restriction	and exclusion			_		N/O N/A Proper hot holding temperatures					
IN OUT	N/O	Dana an antina	Good Hygienic Prac				IN	OUT	OUT N/A Proper cold holding temperatures					4
IN OUT	N/O		g, tasting, drinking or e from eyes, nose and			-			N/O N/A Proper date marking and disposition Time as a public health control (procedures /				-	+
IN OUT	N/O						IN	OUT I	N/O N/A	record				
			enting Contamination and properly washed			-	+			Consi	Consumer Advisory umer advisory provided for raw	or	_	+
IN OUT	N/O	N/O					IN	OUT	Γ N/A	undercooked food				
IN OUT	N/O		d contact with ready-ternate method proper								Highly Susceptible Population	ons		
IN OUT Adequate handwashing facilities supplied &							IN	OUT	N/O N/A Pasteurized foods used, prohibited foods not			oods not		
		accessible	Approved Source	e			+			offere	Chemical		_	+
IN OUT Food obtained from approved source						IN	OUT	Γ Ν/Α	Food additives: approved and properly used					
IN OUT N/O N/A Food received at proper temperature			ure			II	N	OUT	Toxic used	substances properly identified,	stored and			
IN O	UT		condition, safe and							С	onformance with Approved Pro			
IN OUT N/C	N/A	Required rec destruction	ords available: shells	tock tags, parasite	9						oliance with approved Specialize IACCP plan	ed Process		
			rotection from Contar	mination						anui	IACCI PIAII		_	
IN OUT	N/A	Food separa	ted and protected						the left o	f each it	tem indicates that item's status	at the time	of the	
IN OUT	N/A	Food-contact	t surfaces cleaned &	sanitized			inspection. IN = in compliance OUT = not in compliance			nce				
IN OUT	N/O		sition of returned, pred, and unsafe food	viously served,			N/A = not applicable $N/O = not observed$							
					GOOD RI									
IN LOUT				tive measures to					ogens, ch	emicals	, and physical objects into food	ls.	000	
IN OUT	Paster	Safe Food and Water urized eggs used where required			cos	R	IN	OUT	In-use u	tensils:	Proper Use of Utensils properly stored		cos	R
		and ice from approved source							Utensils	, equipr	ment and linens: properly stored	d, dried,		1
		Food	I Temperature Contro	J			1		handled		le-service articles: properly stor	rad usad		+
	Adequ		for temperature cont						Gloves	used pro	operly	eu, useu		+
		ved thawing m								Uter	nsils, Equipment and Vending			1
	Inerm	iometers provid	ded and accurate								ood-contact surfaces cleanable, tructed, and used	properly		
	Food Identification							Warewa	Warewashing facilities: installed, maintained, used; test strips used					
	Food		d; original container								ct surfaces clean			
	Prevention of Food Contamination Insects, rodents, and animals not present Contamination prevented during food preparation, storage					1		Hot and	Physical Facilities Hot and cold water available; adequate pressure Plumbing installed; proper backflow devices			<u> </u>	+	
						1							+	
and display Personal cleanliness: clean outer clothing, hair restraint,					-	<u> </u>	Sowoza	and	astewater properly disposed		<u> </u>	 		
fingernails and jewelry								Sewage	anu Wa	astewater property disposed				
Wiping cloths: properly used and stored Fruits and vegetables washed before use				,				Toilet facilities: properly constructed, supplied, cleaned				\bot		
					+	 	Garbage/refuse properly disposed; facilities maintained Physical facilities installed, maintained, and clean			 	+			
Person in Ch	arge /T	itle:	(Phon		/	•		, , , , , ,		Date:		1	
0/	<i></i>	,		447	<u> </u>			-	EDI (C.)			.,		
inspector	4401	1/1/	MM	Tele	phone I	NO.			EPHS N	0.	Follow-up: Follow-up Date:	Yes	N	VО
MO 500-1814 (9-13)	7		, 	DISTRIBUTION: WHIT	E – OWNER	R'S COPY	,		CANARY - FI	LE COPY				E6.37

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE



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TIME IN		TIME OUT
DAGE	of	

ESTABLISHMEN	T NAME	ADDRESS		CITY/ZIP			
FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT	LOCATION	TEMP. in ° F		
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIORITY I elimination, prevention or reductio E IMMEDIATE ACTION within 72	TEMS n to an acceptable level, hazards hours or as stated.	associated with foodborne illness	Correct by (date)	Initial	
Code Reference	Core items relate to general sanitation standard operating procedures (SSOP	CORE ITI , operational controls, facilities or s s). These items are to be correc	structures, equipment design, gen	eral maintenance or sanitation ion or as stated.	Correct by (date)	Initial	
					,	ds	
						∜ ∕	
						CV	
		EDUCATION PROV					
		EDUCATION PROV	IDED OR COMMENTS				
Person in C	narge /Title:	A199V		Date:			
Inspector.	Jun D RM	Telephone No	EPHS No.	Follow-up: Follow-up Date:	Yes	No	