

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 INSP	ECTION, OR SL		OD OF TIME AS I	MAY BE SP	ECIFIED	N WRI	TING BY T	HE REG	FACILITIES WHICH M GULATORY AUTHORIT D OPERATIONS.				
ESTABLISHMEN			OWNER:						PERSON IN C	HARG	E:		
ADDRESS:									COUNTY:				
CITY/ZIP:			PHONE:		FAX				P.H. PRIORIT	Υ:	Н	М	L
ESTABLISHMENT TYP BAKERY RESTAURANT	C. STOF			eli Immer F.P.			RY STOR	E	INSTITUTION TEMP.FOOD	Ν	NOBILE	VENDO	ORS
PURPOSE Pre-opening	Routine	Follow-up	Complaint	Other									
FROZEN DESSEI Approved [RT Disapproved	SEWAGE DISPO PUBLIC	SAL PRIVATE		ATER S COMN				COMMUNITY Sampled		PRIVAT Result	Е s	
		<u>.</u>	RISK FA	CTORS AI	ND INTE	RVEN	TIONS						
		ctices and employee I ealth interventions a							ntrol and Prevention as	s contrib	uting fac	tors in	
Compliance		Demonstration of Knov		COS		mpliance	, ,	/.	Potentially Hazardo	us Food	ls	C	COS
IN OUT	Person in ch and performs	arge present, demons	trates knowledge	,	IN	OUT	N/O N/A	Proper	cooking, time and tem	perature	;		
		Employee Health			IN		N/O N/A		reheating procedures				
IN OUT IN OUT		t awareness; policy pr of reporting, restriction			IN IN		N/O N/A		cooling time and temp hot holding temperature		5		
		Good Hygienic Pract	tices		IN	OUT	Γ N/A	Proper	cold holding temperate	ures			
IN OUT N/C	No discharge	g, tasting, drinking or t e from eyes, nose and				OUT I			date marking and disp s a public health control		dures /		
IN OUT N/C	J °	•		_	IN (JUT	N/O N/A	record	s)				
IN OUT N/C	Hondo oloon	venting Contamination and properly washed	by Hands		IN	OUT	Γ N/A		Consumer Adv mer advisory provided ooked food		or		
IN OUT N/C		d contact with ready-to						undere	Highly Susceptible P	opulatio	ns		
IN OUT		ernate method properl Indwashing facilities su			INI		N/O N/A	Pasteu	rized foods used, proh	ibited fo	ods not	_	
	accessible	Approved Source				001	N/O N/A	offered	Chemical	_	_		
IN OUT	Food obtaine	ed from approved sour			IN	OUT	Γ N/A		dditives: approved and				
IN OUT N/O N/	A Food receive	ed at proper temperatu	ire		11	N	OUT	Toxic s used	substances properly ide	entified,	stored a	nd	
IN OUT		d condition, safe and u						Co	nformance with Approv				
IN OUT N/O N/	A Required rec destruction	cords available: shellst	ock tags, parasite	•	IN	OUT	Γ N/A		iance with approved Sp ACCP plan	pecialize	d Proce	S S	
		rotection from Contam	nination										
IN OUT N/A		ted and protected				letter to ection.	o the left of	f each ite	em indicates that item's	status a	at the tin	ie of the	÷
IN OUT N/A		t surfaces cleaned &					compliand t applicabl		OUT = not in c N/O = not obse		се		
IN OUT N/C		osition of returned, prev d, and unsafe food				// = 110	t applicabl	C	N/O = Hot 003	civea			
	0 10 1 10			OOD RETA				· .					
IN OUT		afe Food and Water	ive measures to c	_	R IN	of patr OUT	logens, ch		and physical objects in Proper Use of Utensils		ö.	COS	S R
	teurized eggs us	ed where required						tensils: p	properly stored			—	
VVa	ter and ice from a	approved source					Utensils handled		ent and linens: properly	y stored	, dried,		
		d Temperature Control							e-service articles: prope	erly store	ed, used		
	proved thawing m	t for temperature contr tethods used	01				Gloves	used pro Utens	sils, Equipment and Ve	nding			-
The	ermometers provi	ded and accurate							od-contact surfaces clea	anable,	properly		
	I	Food Identification					Warewa	shing fao	ucted, and used cilities: installed, mainta	ained, us	sed; test		
Foc	Food properly labeled; original container						strips us Nonfood		surfaces clean				
		on of Food Contamina	ition				List and	a a l al u a d	Physical Facilities				
		d animals not present ented during food prep	aration, storage						er available; adequate ed; proper backflow dev		e	-	+
Per		: clean outer clothing,	hair restraint,				Sewage	and was	stewater properly dispo	sed		+	+
	ernails and jewel ping cloths: prope	ry rly used and stored				L	Toilet fa	cilities: p	roperly constructed, su	pplied, o	cleaned		
		s washed before use					Garbage	e/refuse	properly disposed; facil	ities ma	intained		
Person in Charge	/Title [.]		· () Å					i tacilities	installed, maintained, Date:	and clea	an		
	<u> </u>	<u></u>	<u> </u>	Ath	<u>~ y</u>	94 <u>n</u>	10-						
hspecter.			Tele	phone No.	-		EPHS N		Follow-up:	Y	′es		No
	<u>k j jj</u>		DISTRIBUTION: WHIT	E – OWNER'S C	OPY		CANARY – FI		Follow-up Date:				E6.3

E6.37



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PAGE

of

ESTABLISHMENT NAME		ADDRESS		CITY /ZIP			
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT	/ LOCATION	TEMP. i	n ° F	
Code	nitu itama contributa directluta tha	PRIORIT	Y ITEMS	eccepted with feedborne illness	Correct by	Ini	
eference Pric or in	njury. These items MUST RECEI	VE IMMEDIATE ACTION within	tion to an acceptable level, hazards 72 hours or as stated.	associated with foodborne liness	(date)		
						<u> </u>	
						-	
eference Cor	re items relate to general sanitatio ndard operating procedures (SSO	CORE n, operational controls, facilities o Ps). These items are to be con	ITEMS or structures, equipment design, gen rected by the next regular inspecti	eral maintenance or sanitation ion or as stated.	Correct by (date)	Init	
ference Cor	re items relate to general sanitatio ndard operating procedures (SSO	n, operational controls, facilities of	or structures, equipment design, gen	eral maintenance or sanitation ion or as stated.	Correct by (date)	-C	
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