

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

TIME IN			TIME OUT
PAGE	1	of	

NEXT RO	UTINE	INSPE	CTION, OR SU	CH SHORTER PER	IOD OF TIME AS	MAY BE	SPEC	IFIED	N WRI	TING BY 1	THE RE	R FACILITIES WHICH MUST BE CORRE GULATORY AUTHORITY. FAILURE TO OD OPERATIONS	COMPL	Y THE Y
			IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD O OWNER:						PERSON IN CHARGE:					
ADDRESS:			<u> </u>							COUNTY:	COUNTY:			
CITY/ZIP:			PHONE: FAX:					P.H. PRIORITY: H	М	L				
ESTABLISHMENT TYPE BAKERY C. STORE CATERER RESTAURANT SCHOOL SENIOR C								INSTITUTION MOBILE V						
PURPOS Pre	E e-openi	ing	Routine	Follow-up	Complaint	Oth	ner							
FROZE Appro	oved		approved	SEWAGE DISPO PUBLIC	DSAL PRIVAT	E			UPPL //UNIT			-COMMUNITY PRIVATE Sampled Results		
					RISK FA	CTORS	AND	INTE	RVEN	TIONS				
				ctices and employee								ontrol and Prevention as contributing fact	ors in	
Complian		33 Outbit		emonstration of Kno		COS			mplianc		y .	Potentially Hazardous Foods	CO	S I
IN	(DUT		arge present, demon	strates knowledge) ,		IN	OUT	N/O N/A	Prope	er cooking, time and temperature		
			and performs duties Employee Health							N/O N/A	Prope	er reheating procedures for hot holding		-+
IN		DUT		awareness; policy p				_		N/O N/A		er cooling time and temperatures		
IN	C	DUT	Proper use of	reporting, restriction Good Hygienic Prac			_	IN IN	OUT OU	N/O N/A T N/A		er hot holding temperatures er cold holding temperatures		
IN (OUT	N/O		, tasting, drinking or	tobacco use					N/O N/A	Prope	er date marking and disposition		
IN (OUT	N/O	No discharge	from eyes, nose and	d mouth			IN	OUT	N/O N/A Time				
IN (OUT	N/O		enting Contamination and properly washed				IN	OU	T N/A		Consumer Advisory umer advisory provided for raw or		-
			No bare hand	I contact with ready-	to-eat foods or			╂`	underco			rcooked food Highly Susceptible Populations		-
approved alternate method prope			rnate method prope	rly followed				Pastouriz			eurized foods used, prohibited foods not			
IN	IN OUT Adequate handwashing facilities s accessible						IN	N OUT N/O N/A Pasteurize			ed .	_		
IN OUT Food obtained from approved sou					-	IN	IN OUT N/A Food addit			Chemical additives: approved and properly used		-		
IN OUT N/O N/A Food received at proper tempera								Toxic	substances properly identified, stored an	d				
IN	,									Conformance with Approved Procedures				
IN OUT N/O N/A Required records available: shellst destruction		0 / 1			IN OUT		T N/A	N/A Compliance with approved Specialized Process and HACCP plan						
				otection from Contai	mination				1-444	41 1-64 -	£ !:	4	41	
	OUT	N/A		ed and protected	inspection									
IN (in =				in compliance OUT = not in compliance not applicable N/O = not observed							
IN	IN OUT N/O Proper disposition of returned, proper disposition of returned disposition		viously served,			N	/A = no	ot applicab	able IV/O = not observed					
			0 10 1 10			GOOD RE					<u> </u>			
IN OUT			Good Retail Practices are preventative me Safe Food and Water			COS	e introd	IN	or pati			Proper Use of Utensils	cos	R
		Pasteurized eggs used where required							In-use utensils: pr		properly stored			
		Water	and ice from a						Utensils handled	, equipment and linens: properly stored, dried,				
			Food	Temperature Contro	ol		+	+		Single-use/single-service articles: properly stored, use			+-	
			ate equipment	for temperature con-	trol					Gloves	oves used properly			1
			ved thawing mo							Food ar		nsils, Equipment and Vending pod-contact surfaces cleanable, properly		+-
		1110111	Thermometers provided and accurate Food Identification							designe	d, cons	tructed, and used		
									strips us					
		Food	oroperly labele Prevention	ation			-		Nonfood	Nonfood-contact surfaces clean Physical Facilities			+	
		Insect	s, rodents, and								ater available; adequate pressure		+-	
		Conta	Contamination prevented during food preparation and display								nbing installed; proper backflow devices			
	Personal cleanliness: clean outer clothing, fingernails and jewelry			, hair restraint,					Sewage	ewage and wastewater properly disposed				
Wiping cloths: properly used and stored										properly constructed, supplied, cleaned				
	Fruits and vegetables washed before use						-				e properly disposed; facilities maintained		+	
Person	in Ch	arge /T	itle: 17	-		1	l	I	l	riiysica	ı ıacılıtı	es installed, maintained, and clean Date:	1	
			<u> </u>											
Inspect				lh 1 -	Tele	phone N	No.			EPHS N	0.	Follow-up: Yes Follow-up Date:	1	No



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

TIME IN		TIME OUT					
DAGE	of						

ESTABLISHMENT NAME		ADDRESS		CITY	CITY/ZIP			
FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD	PRODUCT/ LOC	ATION	TEMP. in ° F		
Code		PRIORITY I	TEMS			Correct by	Initial	
Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	elimination, prevention or reduction E IMMEDIATE ACTION within 72	to an acceptable le hours or as stated	evel, hazards associ I.	ated with foodborne illness	(date)	IIIIIIai	
							1/	
Code		CORE ITE	MS			Correct by	Initial	
Reference	Core items relate to general sanitation standard operating procedures (SSOP	, operational controls, facilities or s s). These items are to be correc	tructures, equipmer ted by the next rec	nt design, general ma gular inspection or	intenance or sanitation as stated.	(date)	212	
						1	: #	
						Ó	A	
						•	7	
						•	D	
						1	· つ	
			DED 62 62	TAUTO.				
		EDUCATION PROVI	DED OR COMMI	=NIS				
Person in Ch	narge /Title:				Date:			
Inspector:	loffer O Del	Telephone No	. EPI	HS No.	Follow-up: Follow-up Date:	Yes	No	