

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

TIME	IN	ı		TIME OUT
PAG	E	1	of	

NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME A WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE ESTABLISHMENT NAME: OWNER:			E MAY RE	AY RESULT IN CESSATION OF YOUR FOOD (HE RE	OD OPERATIONS.	OPERATIONS. PERSON IN CHARGE:				
ADDRESS:										COUNTY:				
CITY/ZIP:	CITY/ZIP: PHONE:				FAX:			P.H. PRIORITY :	Н	M	L			
ESTABLISHMENT TYPE														
BAKERY	C. STOR			DELI				RY STOR	E	INSTITUTION	MOBILE V	ENDOR	RS	
RESTAURANT PURPOSE	SCHOO	L SENIOR C	ENTER S	UMMER F	.P.	TA	VERN			TEMP.FOOD				
Pre-opening	Routine	Follow-up	Complaint	Othe	er									
FROZEN DESSER Approved Di	T sapproved	SEWAGE DISPO	DSAL PRIVAT	ГЕ		ER SU				-COMMUNITY	PRIVATE			_
License No									Date	Sampled	Results			
			RISK FA	ACTORS	AND	INTER	VENT	TIONS						
										ontrol and Prevention as cont	ributing facto	ors in		_
foodborne illness outb Compliance	_	ealth interventions and communication of Eno		ures to pre			e illnes	_ , ,	/.	Potentially Hazardous Fo	ada	CC	2	
•		arge present, demons			- 11	1	•		Prope	er cooking, time and temperate			,0	
IN OUT	and performs		strates knowledg	О,		IN C	1 TU	N/O N/A	Порс	or cooking, time and temperat	uio			
		Employee Healt						N/O N/A		er reheating procedures for he				
IN OUT		t awareness; policy p						N/O N/A		er cooling time and temperatu	res			
IN OUT	Proper use of	f reporting, restriction Good Hygienic Prac				IN C	<u>1 TUC</u> TUO	N/A N/A	Prope	er hot holding temperatures er cold holding temperatures		-		
IN OUT N/O	Proper eating	g, tasting, drinking or						N/O N/A		er date marking and disposition	n			_
IN OUT N/O		from eyes, nose and						N/O N/A	Time	as a public health control (pro				
114 001 14/0	Desi		. h l la a ala				.01 1	4/0 14//(recor			_		
IN OUT N/O		venting Contamination and properly washed				IN	OUT	- N/A		Consumer Advisory umer advisory provided for ra	w or			_
IN OUT N/O		d contact with ready-t							unde	rcooked food Highly Susceptible Popula	tions			
IN OUT	OUT Adequate handwashing facilities supplied &					IN C	1 TU	N/O N/A	Pasteurized foods used, prohibited foods not offered					
	accessible	Approved Source	e.						offere	Chemical				_
IN OUT	Food obtaine	ed from approved sou				IN	OUT	N/A	Food	additives: approved and prop	erly used			_
IN OUT N/O N/A		d at proper temperate				IN		OUT	Toxic	substances properly identifie		t		
	Facility and							001	used	0f				
IN OUT	Deguired res	d condition, safe and usords available: shells		to						Conformance with Approved Poliance with approved Special				
IN OUT N/O N/A	destruction	ords available. Silelis	tock tags, parasi	ie		IN	OUT	N/A		HACCP plan	260 1 100633	,		
		rotection from Contar	mination			1								
IN OUT N/A	Food separa	ted and protected					etter to ection.	the left of	f each i	tem indicates that item's statu	s at the time	of the		
IN OUT N/A	Food-contac	t surfaces cleaned &	sanitized			IN = in compliance OUT = not in compliance			ance					
IN OUT N/O		sition of returned, pred, and unsafe food	eviously served,			N/	A = no	t applicabl	е	N/O = not observed				
	reconditioned	a, and anodio lood		GOOD RE	TAIL F	PRACTI	CES							
			tive measures to					ogens, ch	emicals	s, and physical objects into foo	ods.			
IN OUT		afe Food and Water		cos	R	IN	OUT		. "	Proper Use of Utensils		cos	R	
		ed where required approved source								properly stored ment and linens: properly stor	ed dried		+	
VVale	, and loc noill c	ippiovou souloe						handled		mont and intens. property stor	ou, unou,			
		Temperature Contro						Single-u	se/sing	le-service articles: properly st	ored, used			
		for temperature cont	rol			\vdash		Gloves					-	
	oved thawing m	etnods used ded and accurate						Food an	d nonfo	nsils, Equipment and Vending ood-contact surfaces cleanable	e properly		+	
THE								designe	d, cons	tructed, and used		<u>L</u>		
Food Identification								Warewa strips us	shing f	acilities: installed, maintained,	used; test			
Food		d; original container								ct surfaces clean				
	Prevention of Food Contamination									Physical Facilities				
Insects, rodents, and animals not present Contamination prevented during food preparation, storage				1		\vdash				ater available; adequate press led; proper backflow devices	sure		-	
and o	display											<u> </u>	1	
Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry										astewater properly disposed	1 -1 1		1	
		rly used and stored s washed before use								properly constructed, supplied properly disposed; facilities r			+	_
Truits	ana vogetable	s .radiida boldie use	\wedge							es installed, maintained, and c			+	_
Person in Charge /	Title:		Hoom	x 131	LA	10 10	D	, ,		Date:			•	
Insperior:		00	1 -7 1 el	phone N) 0.	ע אינ	τ_{\perp}	EPHS N	0.	Follow-up:	Yes		No	_
VICOM	1~ 1/	WW			<u> </u>					Follow-up Date:				

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					

ESTABLISHMENT NAME		ADDRESS		CITY/ZIP		
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/	LOCATION	TEMP. ir	ı°F
2.1					0	1 10 1
Code Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	PRIORITY I elimination, prevention or reduction E IMMEDIATE ACTION within 72	TEMS n to an acceptable level, hazards a ! hours or as stated.	associated with foodborne illness	Correct by (date)	Initial
Code		CORE ITE	EMS		Correct by	Initial
Reference	Core items relate to general sanitation standard operating procedures (SSOP	s). These items are to be correct	structures, equipment design, generated by the next regular inspection	on or as stated.	(date)	
		EDITCATION BROW	IDED OR COMMENTS			
		LDUCATION PROV	IDED ON COMMENTS			
			ρ_{α}	T		
Person in Cl	parge /Title:	tegg	y byout	Date:		
mspector:	oph Oll	Telephone No	ENAS No.	Follow-up: Follow-up Date:	Yes	No