

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

TIME IN			TIME OUT
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NEXT ROUTINE	INSPE	CTION, OR SU		OD OF TIME AS	MAY BE	SPEC	IFIED I	N WRI	TING BY T	HE RE	GULATORY AUTHORITY OD OPERATIONS.				
ESTABLISH	MENT N	IAME:		OWNER:							PERSON IN C	HARGE:			
ADDRESS:											COUNTY:				_
CITY/ZIP: PHONE:				FAX:					P.H. PRIORITY	′: H	М	L	_		
			ELI UMMER I				MOBILE	VENDOR	RS						
PURPOSE Pre-open		Routine	Follow-up	Complaint	Oth			7 (V E1 (1)	<u> </u>		TEIWI II GGB				_
FROZEN DE Approved		approved	SEWAGE DISPO	SAL PRIVAT	Е			UPPL\			-COMMUNITY	PRIVAT			
License No										Date	Sampled	Results	·		
				RISK FA											
		eaks. Public h	ealth interventions a	re control measu	res to pre	event fo					ontrol and Prevention as	contributing fac			
Compliance			Demonstration of Kno		COS	S R	Coi	mpliance)	D	Potentially Hazardou		CC	OS F	₹
IN (TUC	and performs			9,		IN (N/O N/A						
IN C	Employee Health IN OUT Management awareness; policy present							N/O N/A						_	
	DUT		f reporting, restriction	and exclusion			IN (1 TUC	N/O N/A	N/A Proper hot holding temperatures					_
IN OUT	N/O	Proper eating	Good Hygienic Prac , tasting, drinking or				IN (<u> </u>	Γ N/A N/O N/A	U U					_
IN OUT	N/O		from eyes, nose and						N/O N/A	Time	as a public health control				_
		Prev	enting Contamination	by Hands			1			record	ds) Consumer Advis	sory			-
IN OUT	N/O	Hands clean	and properly washed				IN	OUT	N/A Consumer advisory provided for raw or undercooked food			or raw or			
IN OUT	N/O	No bare hand contact with ready-to-eat foods or						Highly Susceptible Populations							
	DUT	approved alternate method properly followed Adequate handwashing facilities supplied & accessible					IN OUT N/O N/A Pasteurize offered				eurized foods used, prohib	oited foods not			_
			Approved Source								Chemical				
	DUT	Food obtained from approved source Food received at proper temperature					IN	Toylo substances preparly identified stored an			nd		_		
IN OUT N/C							II.	N .	OUT	used	,				
IN OUT Food in good condition, safe and unadulterated Required records available: shellstock tags, parasite			e			Conformance with Approved Procedures Compliance with approved Specialized Process			SS		_				
IN OUT N/C	O N/A	destruction			•		IN	OUT	Γ N/A		ACCP plan				_
IN OUT	N/A		rotection from Contanted and protected	ilination			The	letter to	the left of	each i	tem indicates that item's s	status at the tim	e of the		
IN OUT N/A Food-contact surfaces cleaned & sanitized					inspection. IN = in compliance OUT = not in compliance										
IN OUT	N/O		sition of returned, pre d, and unsafe food	viously served,					t applicable		N/O = not obse				
		reconditioned	a, and unsale lood	(GOOD RE	ETAIL F	PRACT	ICES							Ī
IN OUT				ive measures to	control th	e introd	duction	of path	ogens, che	emicals	s, and physical objects into	o foods.	cos		_
IN OUT	Paste		afe Food and Water ed where required		003	K	IIN	001	In-use u	tensils:	Proper Use of Utensils properly stored		003	R	-
	Water	and ice from a	pproved source						Utensils, handled	equipr	ment and linens: properly	stored, dried,			
	A de au		Temperature Contro								le-service articles: proper	ly stored, used			_
		ved thawing m		101					Gloves	s used properly Utensils, Equipment and Vending					_
	Thermometers provided and accurate								and nonfood-contact surfaces cleanable, properly ned, constructed, and used						
		Food Identification							Warewa	rewashing facilities: installed, maintained, used; test					-
	Food	od properly labeled; original container							strips us Nonfood	od-contact surfaces clean					-
	Incoct	Prevention of Food Contamination								Physical Facilities					
	Insects, rodents, and animals not present Contamination prevented during food preparation, storage and display									Hot and cold water available; adequate pressure Plumbing installed; proper backflow devices					_
	Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry									Sewage and wastewater properly disposed					
Wiping cloths: properly used and stored Fruits and vegetables washed before use								Toilet facilities: properly constructed, supplied, cleaned Garbage/refuse properly disposed; facilities maintained				-	_		
									es installed, maintained, a				_		
Persen in C	arge /T	ïtle:	1								Date:				
Inspector:	dha	11		Tele	phone N	No.			EPHS No	Э.	Follow-up: Follow-up Date:	Yes		No	_
MO 580-1814 (9-1)		4 /2		DISTRIBUTION: WHI	TE – OWNER	R'S COPY	,	ı	CANARY – FI	LE COPY				E6.37	7



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TIME IN	TIME OUT
PAGE	of

ESTABLISHMENT NAME		ADDRESS		CITY/ZIP			
FOOD PRODUCT/LOCATION		TEMP. in ° F	TEMP. in ° F FOOD PRODUCT			TEMP. in ° F	
Code		PRIORITY I	TFMS			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	n to an acceptab hours or as sta	le level, hazards as	ssociated with foodborne illness	(date)	ii iii ca
Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	CORE ITE n, operational controls, facilities or s Ps). These items are to be correct	tructures, equipr	ment design, gener	ral maintenance or sanitation on or as stated.	Correct by (date)	Initial
							-
		EDUCATION PROV	DED OR COM	MENTS			
Person in Ch	name Title:	0			Date:		
Uspector	home / tal	Telephone No		EPHS No.	Follow-up: Follow-up Date:	Yes	No