

## 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 I	INSPEC	CTION, OR SU	ICH SHORTER PERI	OD OF TIME AS	MAY BE SF	PECIFIED	IN WR	ITING BY 1	THE RE	FACILITIES WHICH MUS GULATORY AUTHORITY.	T BE CORRI FAILURE T	ECTED E	3Y THE LY
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NO ESTABLISHMENT NAME: OWNER:			OWNER:							PERSON IN CHARGE:			
ADDRESS:										COUNTY:			
CITY/ZIP: PHONE:			PHONE:	FAX:				P.H. PRIORITY :	Н	М	L		
ESTABLISHMENT BAKERY RESTAUR		C. STOR SCHOO			ELI JMMER F.F	) <u>.</u>	GROC TAVER	ERY STOR	ŧΕ	INSTITUTION TEMP.FOOD	MOBILE	VENDO	RS
PURPOSE Pre-openin	ng	Routine	Follow-up	Complaint	Other								
FROZEN DESSERT Approved Disapproved PUBLIC PRIVATE License No					WATER SUPPLY COMMUNITY NON-COMMUNITY PRIVATE Date Sampled Results								
					CTORS A								
			ctices and employee ealth interventions							ontrol and Prevention as co	ontributing fac	ctors in	
Compliance			Demonstration of Kno	wledge	COS		omplian			Potentially Hazardous		C	OS R
IN O	UT	Person in cha and performs	arge present, demons s duties	strates knowledge	,	IN	IN OUT N/O N/A Proper cooking, time			er cooking, time and temper	ature		
IN OI			Employee Healt				IN OUT N/O N/A Proper reheating procedures for hot holding						
IN OL			t awareness; policy pr f reporting, restriction							er cooling time and tempera er hot holding temperatures	poling time and temperatures		
IN OUT	N/O	Dana a a a a stina	Good Hygienic Prac			IN	Ol	JT N/A	Prope	er cold holding temperature	S		
IN OUT	N/O		g, tasting, drinking or to the from eyes, nose and				OUT	N/O N/A		er date marking and disposi as a public health control ()			_
IN OUT	N/O	Prov	enting Contamination	by Hands	_	IIN	001	N/O N/A	record	ds) Consumer Adviso	n.		
IN OUT	N/O		and properly washed			IN	OL	JT N/A		umer advisory provided for			
		No bare hand	d contact with ready-to	o-eat foods or			undercook			cooked food Highly Susceptible Pope	ulations		_
IN OUT	N/O	approved alte	ernate method proper	ly followed									
IN OL	IN OUT Adequate handwashing facilities supplied & accessible				IN	IN OUT N/O N/A Pasteurized foo offered				ed foods not			
IN OU	IT	Food obtaine	Approved Sourced from approved source			IN	OL	JT N/A	Food	Chemical additives: approved and pr	operly used		_
IN OUT Food obtained from approved source IN OUT N/O N/A Food received at proper temperature					IN	OUT	Toxic	substances properly identi		nd			
IN OUT Food in good condition, safe and unadulterated				-			used	onformance with Approved	Procedures				
IN OUT N/O N/A Required records available: shellstock tags, parasite destruction			Э	IN	OL	JT N/A	Comp	liance with approved Spec IACCP plan		SS			
			rotection from Contan	nination		H <sub>Th</sub>	o lottor	to the left o	f oach it	tom indicatos that itom's st	atue at the tin	no of the	
IN OUT N/A Food separated and protected  IN OUT N/A Food-contact surfaces cleaned & sanitized				The letter to the left of each item indicates that item's status at the time of the inspection.									
Proper disposition of returned previously served				IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed									
IN OUT	N/O		d, and unsafe food					•••					
		Good Retail P	ractices are preventat		CONTROL the i				emicals	, and physical objects into	foods		
IN OUT		Sa	afe Food and Water	vo modouroo to c		R IN	OUT			Proper Use of Utensils		COS	R
			ed where required approved source							properly stored ment and linens: properly st	ored dried		_
			• •				1	handled	<u> </u>	, , ,	, ,		
	Adequ		Temperature Contro					Single-u Gloves		le-service articles: properly operly	stored, used		_
	Approv	ved thawing m	ethods used						Uter	nsils, Equipment and Vendi			
	Therm	ometers provid	ded and accurate							od-contact surfaces cleana tructed, and used	ble, properly	'	
	Food Identification							shing fa	acilities: installed, maintaine	ed, used; test	:		
	Food properly labeled; original container								et surfaces clean				
	Prevention of Food Contamination  Insects, rodents, and animals not present						Hot and	cold wa	Physical Facilities ater available; adequate pre	ASSIIFA			
Contamination prevented during food preparation, storage and display								led; proper backflow device			+		
Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry						Sewage	and wa	astewater properly disposed	t		+		
Wiping cloths: properly used and stored						Toilet fa	cilities:	properly constructed, supp	ied, cleaned				
	Fruits	and vegetables	s washed before use			_	+			properly disposed; facilities installed, maintained, and			+
Person in Cha	rge /T	itle:		768	1/6	7/	<u> </u>	iyoioa		Date:	5.00.1	1	
/nsp/ector:		<i>'</i> /)-	1/	Tele	phone No			EPHS N	0.	Follow-up:	Yes		No
Cell	بابھ	L !!! f				000		CANADY	U.E. 00.DV	Follow-up Date:			



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TIME IN		TIME OUT				
DAGE	of					

ESTABLISHMENT 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 reduction /E IMMEDIATE ACTION within 72	TEMS  n to an acceptable level, hazards a l hours or as stated.	associated with foodborne illness	Correct by (date)	Initial	
						. 1	
					•	160	
Code		CORE ITE	EMS		Correct by	Initial	
Reference	Core items relate to general sanitation standard operating procedures (SSOF	n, operational controls, facilities or s Ps). <b>These items are to be correc</b>	structures, equipment design, gene sted by the next regular inspection	eral maintenance or sanitation on or as stated.	(date)		
						» (/	
						<i>P</i> V	
		EDUCATION PROV	IDED OR COMMENTS				
			, //				
Person in Ch	narge /Title:	Ph.41 7/		Date:			
Inspector	John D. Ret	relephone No	EPHS No.	Follow-up: Follow-up Date:	Yes	No	