

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

TIME OUT TIME IN

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ESTABLISHMENT NAME: OWNER:			0	MAY RESULT IN CESSATION OF YOUR FOOD O				PERSON IN CHARGE:						
ADDRESS:											COUNTY:			
CITY/ZIP:			PHONE: FAX:					P.H. PRIORITY :	н	М	L			
ESTABLISHMEN BAKERY RESTAL	(C. STOR SCHOO			ELI IMMER F	P		GROCE	RY STOR		NSTITUTION EMP.FOOD	MOBILE	VENDO	RS
PURPOSE Pre-oper		Routine	Follow-up	Complaint	Othe									
FROZEN DE Approved	SSERT	approved	SEWAGE DISPO PUBLIC	DSAL PRIVATE				JPPLY IUNITY			MMUNITY mpled	PRIVAT Result	Е s	
icense no				RISK FA	CTORS	AND	INTE	RVENT	IONS					
			ctices and employee								and Prevention as cont	tributing fac	ctors in	
Compliance			Demonstration of Kno		COS			npliance			Potentially Hazardous Fo	oods	С	OS
IN OUT		Person in charge present, demonstrates knowledge, and performs duties			,		IN (N TUC	N/O N/A	N/A Proper reheating procedures for hot holding				
IN	OUT	Employee Health Management awareness; policy present												
	OUT		f reporting, restriction	and exclusion			IN C	N TUC	N/O N/A	Proper hot	t holding temperatures	ies		
	N/O	Proper eating	Good Hygienic Prac			_	IN IN (TUO 1 TUC	N/A /0 N/A		d holding temperatures te marking and disposition	n		
								1/0 N/A	Time as a	public health control (pro				
		Prev	enting Contamination	h by Hands		+				records)	Consumer Advisory			
N OUT	N/O	Hands clean	and properly washed	1			IN	OUT	N/A	Consumer undercook	advisory provided for ra	w or		
N OUT	N/O		d contact with ready-								lighly Susceptible Popula	ations		
IN OUT Adequate handwashing facilities						IN OUT N/O N/A		N/O N/A		ed foods used, prohibited	foods not			
		accessible	Approved Source	e						offered	Chemical			
IN OUT Food obtained from approved source IN OUT N/O N/A Food received at proper temperature										litives: approved and properly used ostances properly identified, stored and		nd		
	O N/A DUT		condition, safe and			_			001	Conformance with Approved Procedures		_		
		Required rec	ords available: shells					OUT	OUT N/A Compliance		e with approved Special		ss	
	•	destruction Pi	rotection from Conta	mination						and HACC	CP plan			
N OUT	N/A	Food separat	ed and protected						the left of	each item i	ndicates that item's statu	us at the tin	ne of the	
N OUT	N/A	Food-contact	surfaces cleaned &	sanitized			IN = in compliance OUT = not in compliance							
N OUT	N/O		sition of returned, pre I, and unsafe food				N,	A = not	applicable	9	N/O = not observed	1		
				G	OOD RE									
IN OUT			ractices are preventa ife Food and Water	tive measures to c	control the	e introd R	uction IN	of path OUT	ogens, che		d physical objects into for	ods.	COS	;
	Paster		ed where required		000	K		001		ensils: prop			000	_
	Water	and ice from a	pproved source						Utensils, handled	equipment	and linens: properly stor	ed, dried,	d,	
			Temperature Contro						Single-u		rvice articles: properly st	tored, used	1	
		ate equipment /ed thawing me	for temperature con ethods used	rol					Gloves ι	sed properl	y Equipment and Vending	1		_
			led and accurate							d nonfood-c	ontact surfaces cleanabl	, le, properly	,	1
		F	ood Identification						Warewa	shing faciliti	ed, and used es: installed, maintained	, used; test	:	-
	Food r	properly labeled							rips used onfood-contact surfaces clean				_	
		od properly labeled; original container Prevention of Food Contamination							Physical Facilities					
Conta and d Perso fingen Wipin		ts, rodents, and animals not present amination prevented during food preparation, storage lisplay						Hot and cold water available; adequate pressure				sure		+
									Plumbing installed; proper backflow devices					\downarrow
		nal cleanliness: clean outer clothing, hair restraint, nails and jewelry							Sewage	and wastew	vater properly disposed			
		ng cloths: properly used and stored							Toilet facilities: properly constructed, supplied, cleaned Garbage/refuse properly disposed; facilities maintained				_	
	Fruits	and vegetables washed before use									stalled, maintained, and o			+
orcon in O	arge /T	itle:					-			Da				



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ESTABLISHMENT NAME	ADDRESS		CITY /ZIP			
FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/	LOCATION	TEMP. ii	n ° F	
Code	PRIORITY I	ITEMS		Correct by	Initial	
Reference Priority items contribute directly to the el or injury. These items MUST RECEIVE	imination, prevention or reduction IMMEDIATE ACTION within 72	n to an acceptable level, hazards a 2 hours or as stated.	associated with foodborne illness	(date)		
					10	
					1.7	
					J-7	
					.1-7-	
					× ·	
Code	CORE ITE	EMS	ral maintenance as conitation	Correct by	Initial	
Reference Core items relate to general sanitation, o standard operating procedures (SSOPs)). These items are to be correct	cted by the next regular inspection	on or as stated.	(date)		
					<u>) . [</u>	
					التج ز	
					J7 1:1	
					1.9	
					19	
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					J ./	
	EDUCATION PROV	IDED OR COMMENTS			L	
	4		L _			
Person in Charge /Title:	Luis T	Terek	Date:			
Vispector / Ad	Telephone No	D. EPHS No.	Follow-up: Follow-up Date:	Yes	No	