

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

TIME IN TIME OUT DATE PAGE 1 of

NEXT ROUTINE INSPE	TION THIS DAY, THE ITEMS NO CTION, OR SUCH SHORTER PE	RIOD OF TIME AS MA	AY BE SPE	CIFIED	N WRIT	TING BY 1	THE REG	ULATORY AUTHORITY. FAILUR			Ξ
ESTABLISHMENT	OWNER:	IN THIS NOTICE MAY RESULT IN CESSA OWNER:				UKTOOL	PERSON IN CHARGE:				
ADDRESS:					HMENT	NUMBEI	R: COUNTY:	COUNTY:			
CITY/ZIP:	PHONE:	PHONE:					P.H. PRIORITY :	H M	L		
ESTABLISHMENT TYPE BAKERY RESTAURANT	C. STORE CATERE SCHOOL SENIOR		l MER F.P.		GROCE	RY STOR	E	INSTITUTION MOB TEMP.FOOD	ILE VEND	ORS	
PURPOSE Pre-opening	Routine Follow-up	Complaint	Other								
FROZEN DESSERT Approved Dis				R SUPPLY OMMUNITY NON-COM Date Sam			MMUNITY PRIVATE npled Results				
		RISK FAC		D INTE	RVENT	TIONS					
Risk factors are food p	preparation practices and employe	e behaviors most com	monly repo	rted to the	ne Cente	ers for Dis	ease Con	trol and Prevention as contributing	g factors in	l	Ī
Compliance	eaks. Public health interventions Demonstration of Ki				ne llines mpliance		/.	Potentially Hazardous Foods		COS	R
IN OUT	Person in charge present, demo and performs duties	onstrates knowledge,		IN	OUT N	N/O N/A	Proper	cooking, time and temperature			
IN1	Employee Hea					N/O N/A		reheating procedures for hot hold	ing		
IN OUT IN OUT	Management awareness; policy Proper use of reporting, restriction		+					Proper cooling time and temperatures Proper hot holding temperatures			
	Good Hygienic Pr	actices		IN	OUT	N/A	Proper	cold holding temperatures			
IN OUT N/O	Proper eating, tasting, drinking of No discharge from eyes, nose a				OUT I			date marking and disposition a public health control (procedure	es /		
	Preventing Contaminati	on by Hands		IIN		N/O N/A	records) Consumer Advisory			
IN OUT N/O	Hands clean and properly wash			IN	OUT	N/A		ner advisory provided for raw or boked food			
IN OUT N/O No bare hand contact with ready-t							underco	Highly Susceptible Populations			_
IN OUT Adequate handwashing facilities s accessible				IN			Pasteur offered	ized foods used, prohibited foods	not		
	Approved Sou	irce					onereu	Chemical			
IN OUT	Food obtained from approved so Food received at proper temper				OUT	N/A		ditives: approved and properly us ubstances properly identified, store			
IN OUT N/O N/A				IN			used				
IN OUT	Food in good condition, safe and							nformance with Approved Procedures iance with approved Specialized Process			
IN OUT N/O N/A	/A Required records available: shellstock tags, paid destruction Protection from Contamination			IN				and HACCP plan			
IN OUT N/A	Food separated and protected	ammation		The	letter to	the left o	f each iter	m indicates that item's status at the	e time of th	ne	
IN OUT N/A				inspection. IN = in compliance				OUT = not in compliance			
IN OUT N/O Proper disposition of returned, prev					N/A :	= not appl =Correcte	icable	N/O = not observed			
	reconditioned, and unsafe food		OD RETAII	_ PRAC							-
	Good Retail Practices are preven	tative measures to cor	trol the intr	oduction	of path	ogens, ch	emicals, a	and physical objects into foods.			
IN OUT	Safe Food and Water urized eggs used where required		COS R	IN	OUT			Proper Use of Utensils	CO	DS R	
	r and ice from approved source							ent and linens: properly stored, drie	ed,		
	Food Temperature Contro			_			handled Single-use/single-service articles: properly stored, used				
Adequ	uate equipment for temperature co						oves used properly				
	oved thawing methods used nometers provided and accurate					Food or	Utensils, Equipment and Vending				
Inem						ood and nonfood-contact surfaces cleanable, proper lesigned, constructed, and used					
					Warewa strips us	arewashing facilities: installed, maintained, used; test					
Food	r ination				Nonfood	d-contact :	surfaces clean				
Insect			-		Hot and	cold wate	Physical Facilities er available; adequate pressure				
Conta	Insects, rodents, and animals not present Contamination prevented during food prepar red displays			1			umbing installed; proper backflow devices				
and display Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry						Sewage	and wast	tewater properly disposed			
			-		Toilet fa	Foilet facilities: properly constructed, supplied, cleaned					
Wiping cloths: properly used and stored Fruits and vegetables washed before use						Garbage	arbage/refuse properly disposed; facilities maintained				
Person in Charge /T	Title Davas La construction			1		Physica		installed, maintained, and clean Date:			
	^{title:} Report was email	<u>ea to manag</u>	er								
Inspector:	um) Pecon t		T	elepho	ne No.	EPH		Follow-up: Yes Follow-up Date:		No	
MO 580-1814 (9-13)		DISTRIBUTION: WHITE -	OWNER'S CO	PY		CANARY – F				E6.3	37



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ALL CONTRACTOR	OOD ESTABLISHMENT IN	ISPECTION REPORT			PAGE ² of		
ESTABLISHMENT NAME ADDRESS				CITY /ZIF	þ		
FOOD PRODUCT/LOCATION		TEMP. in ° F FOOD PRODUCT/			ION	TEMP. in ° F	
Code		PRIÕRITY IT	FMS			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 level, haza hours or as stated.	ards associate	d with foodborne illness	(date)	mila
Code Reference	Core items relate to general sanitatior	CORE ITE	ructures, equipment design,	general maint	enance or sanitation	Correct by (date)	Initial
	standard operating procedures (SSOF	Ps). These items are to be correct	ed by the next regular insp	pection or as	stated.	. ,	
		EDUCATION PROVID	DED OR COMMENTS				
Person in Ch	arge /Title: Powort was own	ail of to manager			Date:		
Inspector:	^{arge /Title:} Report Was em Catulyn Recut	niven iv mariager	Telephone No.	EPHS No.	Follow-up:	Yes	No
MO 580-1814 (9-13)	any kans	DISTRIBUTION: WHITE - OWNER'S COP		COPY	Follow-up Date:		E6.37A