

## 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	INSPEC	TION THIS DAY, THE ITEMS N CTION, OR SUCH SHORTER P FOR CORRECTIONS SPECIE	ERIOD OF TIME AS	MAY BE	SPEC	IFIED	IN WR	ITING BY 1	THE REGUI	LATORY AUTHORITY. FA			
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE ESTABLISHMENT NAME: OWNER:			1417 (1 1 (1		PERSON IN CHARGE:					RGE:			
ADDRESS:						ESTABLISHMENT NUMBER: COUNTY:							
CITY/ZIP: PHONE:						FAX:				P.H. PRIORITY :	Н	М	L
ESTABLISHMENT TYPE BAKERY C. STORE CATERER DEL RESTAURANT SCHOOL SENIOR CENTER SUM				ELI JMMER	E D					INSTITUTION TEMP.FOOD	MOBILE V	ENDOR:	S
PURPOSE Pre-openii		SCHOOL SENIO  Routine Follow-up	Complaint		her		AVEIX			TEIVII II OOD			
FROZEN DES		approved Not Applicable	SEWAGE DISPO PUBL			TER S			NON-CC	DMMUNITY	PRIVATE		
License	No		PRIV						Date Sa	ampled	Results		
			RISK FA	CTORS	S AND	INTE	RVEN	ITIONS					
		reparation practices and emploeaks. Public health intervention								ol and Prevention as control	ributing fact	ors in	
Compliance		Demonstration of		CO			mplianc			Potentially Hazardous Fo	ods	COS	S R
IN OUT		Person in charge present, den and performs duties	nonstrates knowledge	,		IN	OUT	N/O N/A	Proper co	ooking, time and temperate	ure		
		Employee H	ealth			IN	OUT	N/O N/A	Proper re	eheating procedures for ho	ot holding		
IN OUT		Management awareness; police						N/O N/A		poling time and temperatur	res		
IN OUT		Proper use of reporting, restrict Good Hygienic				_	OUT OUT	N/O N/A N/A		ot holding temperatures old holding temperatures			
IN OUT N/O		Proper eating, tasting, drinking	or tobacco use					N/O N/A	Proper da	ate marking and disposition			
IN OUT N/O	1	No discharge from eyes, nose	and mouth			IN	OUT	N/O N/A	Time as a records)	a public health control (pro	cedures /		
		Preventing Contamina	ation by Hands						records)	Consumer Advisory			
IN OUT N/O		Hands clean and properly was	hed			IN	OUT	N/A			advisory provided for raw or		
IN OUT N/O		No bare hand contact with ready-to-eat foods or approved alternate method properly followed							undercooked food Highly Susceptible Populations				
IN OUT		Adequate handwashing facilities supplied & accessible				IN	IN OUT N/O N/A Pasteurized food offered			red foods used, prohibited	foods not		
IN OUT		Approved So					OUT			Chemical			
IN OUT NO	N N / A	Food obtained from approved Food received at proper temperature.					OUT	N/A		ditives: approved and propostances properly identified		d	
IN OUT N/C	) N/A					IN	OUT		used				
IN OUT		Food in good condition, safe a Required records available: sh				1				ormance with Approved Punce with approved Speciali			
IN OUT N/C	N/A	destruction				IN	OUT	N/A	and HAC		1260 1 10063	•	
		Protection from Co					1.0		<b>.</b>	Conflored and the state of the			
IN OUT	N/A	Food separated and protected					ection		r each item	indicates that item's statu	is at the time	e or tne	
IN OUT N/O	N/A Food-contact surfaces cleaned & sanitized  Proper disposition of returned, previously served,					IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed							
114 001 10/0		reconditioned, and unsafe foo		OOD B	ETAII I	DDAC		S=Correcte	ed On Site	R=Repeat Item			
		Good Retail Practices are preven		OOD R				hogens, ch	emicals, an	nd physical objects into foo	ods.		
IN OUT		Safe Food and Wat	er	COS	R	IN	OUT		Pr	oper Use of Utensils		cos	R
		urized eggs used where required and ice from approved source	<u> </u>							perly stored it and linens: properly store	ed dried	+	
	water	and ice norn approved source						handled					
	A da es	Food Temperature Co	ntrol					Single-u	ise/single-s	ervice articles: properly st	ored, used		
		ate equipment for temperature ved thawing methods used	control					Gloves	used prope	riy s, Equipment and Vending			
		ometers provided and accurate							nd nonfood-	contact surfaces cleanable			
		Food Identification				-				ted, and used ties: installed, maintained,	uood: toot		
		roou identification						strips us	sed		useu, test		
	Food p	properly labeled; original contain						Nonfood		urfaces clean			
	Insects	Prevention of Food Conta s, rodents, and animals not pres						Hot and		Physical Facilities available: adequate press	sure		
		sects, rodents, and animals not present ontamination prevented during food preparation, stora							d cold water available; adequate pressure ing installed; proper backflow devices				
	and di	splay nal cleanliness: clean outer clotl	ning hair restraint	-	1	-		Sources	and woots	water properly disposed			
	fingerr	nails and jewelry			<u>L</u>	L		Sewage	and waste	water property disposed			<u>L</u>
	Wiping	cloths: properly used and store								perly constructed, supplied			
	Fruits	and vegetables washed before	use			1-				operly disposed; facilities nations and constalled, maintained, and constalled.			
Person in Cha	arge /T	itle:				1	<u> </u>	Filysica		ate:	ocali	<u> </u>	<u> </u>
	nmL	Markary Katilyno Perant			Те	lepho	ne No		F	ollow-up: ollow-up Date:	Yes		Мо
MO 580-1814 (9-13)	1		DISTRIBUTION: WHIT	E – OWNE	R'S COPY	1		CANARY - F	ILE COPY				E6.37



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ESTABLISHMEN <sup>*</sup>	TNAME	ADDRESS			CITY/ZII	CITY /ZIP			
FOO	OD PRODUCT/LOCATION	TEMP. in ° F		FOOD PRODU	JCT/ LOCAT	TION	TEMP. in ° F		
Code Reference	Priority items contribute directly to the e or injury. These items MUST RECEIVE	PRIO limination, prevention or re IMMEDIATE ACTION with	ORITY ITEMS eduction to an ac thin 72 hours o	cceptable level, hazar r as stated.	ırds associate	d with foodborne illness	Correct by (date)	Initial	
Code Reference	Core items relate to general sanitation, standard operating procedures (SSOPs	operational controls, faciliti	ORE ITEMS ies or structures corrected by the	, equipment design, ne next regular insp	general maint	enance or sanitation stated.	Correct by (date)	Initial	
		EDUCATION F							
		EDUCATION	- אטעוטבט טו	COIVIIVIENTS					
Person in Ch	narge /Title:			-		Date:			
Inspector:	Pengu & Markary Kathyro Rooms	DISTRIBUTION: WHITE – OWN	FR'S COPY	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No E6.37A	



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			PROVIDED OR COMMENTS					
		EDUCATION	PROVIDED OR COMMENTS					
Person in Ch	narge /Title:				Date:			
Inspector: /	Pengun Katay Katayno Peca	DISTRIBUTION: WHITE - OWN	Telephone No.	EPHS No.	Follow-up: Follow-up Date:	Yes	No E6.37A	