

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

TIME IN 5A	TIME OUT
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INEX I ROUTINE	INSPE	CTION, OR SUCH SHORTER PE	RIOD OF TIME AS	MAY BE SPEC	IFIFD	IN WE	RITING BY T	HE REG	FACILITIES WHICH MUST BE CORF GULATORY AUTHORITY. FAILURE 1 ID OPERATIONS	ECTED BY O COMPLY	THE
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT I ESTABLISHMENT NAME: OWNER: DEXTER TOTAL OF THE STAR OF THE ST									PERSON IN CHARGE:	PERSON IN CHARGE:	
ADDRESS:					COL	NICK			COUNTY:	COUNTY:	
CITY/ZIP: PHONE:				FAX	FAX:			STODDARP	STODDARD		
ESTABLISHMENT	TYPE	ER 63841	624-7						P.H. PRIORITY : CH	M 🗆 L	
BAKERY RESTAUR PURPOSE		C. STORE CATERE	CENTER T	DELI EMP. FOOD		GROC	ERY STOR		☐ INSTITUTION ☐ MOBILE VENDORS		
☐ Pre-openin		Routine Follow-up	Complaint	Other							
FROZEN DESSERT Approved Disapproved Not Applicable License No SEWAGE DISPOSAL PUBLIC PRIVATE				WATER SUPPLY COMMUNITY NON-COMMUNITY PRIVATE Date Sampled Results							
District				ACTORS AND							
100dborne Illness	e food p s outbr	preparation practices and employed eaks. Public health intervention	e behaviors most of are control measu	commonly reportures to prevent f	ed to to	he Cer	nters for Dis ess or injury	ease Cor	ntrol and Prevention as contributing fa	ctors in	
Compliance		Demonstration of Ki	nowledge	COS R	Co	mplian	ce		Potentially Hazardous Foods cooking, time and temperature	cos	R
		Person in charge present, demonstrates knowledge, and performs duties		2,							
OUT OUT		Employee He Management awareness; policy	present		IN	OUT	N/O N/A				
IN OUT		Proper use of reporting, restricting Good Hygienic Pr	on and exclusion actices			OUT	N/O N/A N/A	Proper	hot holding temperatures cold holding temperatures		
IN OUT N/O		Proper eating, tasting, drinking of No discharge from eyes, nose a	r tobacco use		(IN)	OUT	N/O N/A	Proper	date marking and disposition		
1001 1070					IN	001	N/O N/A	records			
IN OUT N/O		Preventing Contaminati Hands clean and properly washe			IN	OUT	(N/A)	Consun	Consumer Advisory mer advisory provided for raw or		
IN OUT N/O		No bare hand contact with ready	-to-eat foods or		-			underco	ooked food Highly Susceptible Populations		
IN OUT		approved alternate method prop Adequate handwashing facilities			IN	OUT	N/O N/A	Pasteur	rized foods used, prohibited foods not		
		accessible Approved Sou			-			offered	Chemical		
IN OUT NO N	1/4	Food obtained from approved so	urce		The same of the sa	OUT	N/A	Food ad	dditives; approved and properly used		
IN OUT N/O N/A Food received at proper temperature				CIND	OUT		Toxic su used	ubstances properly identified, stored a	nd		
IN OUT Food in good condition, safe and unaction of the condition of the c		unadulterated stock tags, parasite	e	IN	OUT	(N/A ³)	Complia	nformance with Approved Procedures ance with approved Specialized Proce	20		
		destruction Protection from Control						and HA	CCP plan		
	I/A	Food separated and protected			The letter to the left of each item indicates that item's status at the time of the inspection.						
	/A	Food-contact surfaces cleaned &			IN = in compliance N/A = not applicable OUT = not in compliance N/O = not observed						
IN OUT N/O Proper disposition of returned, previously served, reconditioned, and unsafe food					COS = Corrected On Site R = Repeat Item						
		Good Retail Practices are prevent		GOOD RETAIL I			h				
IN OUT		Safe Food and Water	ative measures to t	COS R	IN	OUT	nogens, cne		Proper Use of Utensils	cos	R
		rized eggs used where required and ice from approved source			V				roperly stored		
	-	• • • • • • • • • • • • • • • • • • • •			6		Utensils, equipment and linens: properly stored, dried, handled				
V	Adequa	Food Temperature Contract equipment for temperature contract equipment for temperature contract equipment for temperature contract equipment for temperature.			V		Single-use/single-service articles: properly stored, used Gloves used properly				
		roved thawing methods used mometers provided and accurate				Utensils, Equipment and Vending					
V	memile				1		designed	, constru	d-contact surfaces cleanable, properly ucted, and used		
	Food Identification				V		Warewas strips use	shing faci ed	ilities: installed, maintained, used; test		
-	Food p	d properly labeled; original container Prevention of Food Contamination					Nonfood-	contact s	surfaces clean		
V	Insects	ects, rodents, and animals not present			W		Physical Facilities Hot and cold water available; adequate pressure				
	Contamination prevented during food preparation, storage and display			V		Plumbing	installed	d; proper backflow devices			
Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			4				tewater properly disposed				
Wiping cloths: properly used and stored Fruits and vegetables washed before use			V		Toilet fac	ilities: pro	operly constructed, supplied, cleaned roperly disposed; facilities maintained				
						X	Physical	facilities	installed, maintained, and clean		
1/	ge / III								Date: 12 - 18 - 19		
Inspector: Telephone No. 568-4593				Sar-		EPHS No		Follow-up: Yes Follow-up Date:	No No		
MO 580-1814 (11-14)			DISTRIBUTION: WHITE	the state of the s	-		CANARY - FILI		onow-up Date. N		50.07



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TIME IN SAM	TIME OUT			
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ESTABLISHMEN	IT NAME R FIZZA CO	ADDRESS A. WALNU	<u> </u>	CITY	6384	11		
	OD PRODUCT/LOCATION	TEMP.	FOOD PRODUCTA		TEMP.			
						The second		
Code		PRIORITY ITE	MS		Correct by	Initial		
Reference	Priority items contribute directly to the eli- or injury. These items MUST RECEIVE	mination, prevention or reduction to	an acceptable level, hazards	associated with foodborne illness	(date)	iritticai		
						The second		
	ALLPRAITE	771-	CXEELTI	7				
	The Indian	10000	COIDECIA					
	ATT	ZE-INSTEOT	122					
						20,000		
						da Ara		
Code Reference	Core items relate to general sanitation, of standard operating procedures (SSOPs).	CORE ITEM perational controls, facilities or stru These items are to be corrected	ctures, equipment design, gene	eral maintenance or sanitation on or as stated.	Correct by Ir (date)	nitial		
/ 3 -			***************************************	1				
6-303	SILL CIETT ON	or working	VATSINK A.	ND DEEL				
	TRIEF	by WOLKIN	6					
	& MUST FL	PAIRO RETUA	ck					
	MUST HI	TAIR SI PLATING	FOR CLEAN	JING& COOKING				
			(An					
	MUSTISE	FELY KEND H	DA-1	e [†] at the				
						3 6		
	The state of the s					A S		
			The state of the s					
					3			
				Water State of the				
		EDUCATION PROVIDE	ED OR COMMENTS			998		
Person in Ch	arge/Title: - Owner			Date: /2 - /8	19			
Inspector:	m A. BRANDEC	Telephone No.	EPHS No.	Follow-up:	Yes A	No		
MO 580-1814 (11-14		DISTRIBUTION: WHITE - OWNER'S COPY	CANARY - FILE COPY	Follow-up Date: /	o hel	E6.37A		