



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

TIME IN: 2:09 TIME OUT: 2:25
PAGE 1 of 2

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: Sonnys OWNER: David Green PERSON IN CHARGE: David Green
 ADDRESS: 17 N Locust COUNTY: Stoddard
 CITY/ZIP: Dexter 63841 PHONE: 820 7999 FAX: _____ P.H. PRIORITY: H M L
 ESTABLISHMENT TYPE
 BAKERY C. STORE CATERER DELI GROCERY STORE INSTITUTION MOBILE VENDORS
 RESTAURANT SCHOOL SENIOR CENTER SUMMER F.P. TAVERN TEMP. FOOD
 PURPOSE
 Pre-opening 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 _____

RISK FACTORS AND INTERVENTIONS

Risk factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance		Demonstration of Knowledge	COS	R	Compliance		Potentially Hazardous Foods	COS	R
IN	OUT	Person in charge present, demonstrates knowledge, and performs duties			IN	OUT	Proper cooking, time and temperature		
		Employee Health			IN	OUT	Proper reheating procedures for hot holding		
IN	OUT	Management awareness; policy present			IN	OUT	Proper cooling time and temperatures		
IN	OUT	Proper use of reporting, restriction and exclusion			IN	OUT	Proper hot holding temperatures		
		Good Hygienic Practices			IN	OUT	Proper cold holding temperatures		
IN	OUT	Proper eating, tasting, drinking or tobacco use			IN	OUT	Proper date marking and disposition		
IN	OUT	No discharge from eyes, nose and mouth			IN	OUT	Time as a public health control (procedures / records)		
		Preventing Contamination by Hands			IN	OUT	Consumer Advisory		
IN	OUT	Hands clean and properly washed			IN	OUT	Consumer advisory provided for raw or undercooked food		
IN	OUT	No bare hand contact with ready-to-eat foods or approved alternate method properly followed					Highly Susceptible Populations		
IN	OUT	Adequate handwashing facilities supplied & accessible			IN	OUT	Pasteurized foods used, prohibited foods not offered		
		Approved Source					Chemical		
IN	OUT	Food obtained from approved source			IN	OUT	Food additives: approved and properly used		
IN	OUT	Food received at proper temperature			IN	OUT	Toxic substances properly identified, stored and used		
IN	OUT	Food in good condition, safe and unadulterated					Conformance with Approved Procedures		
IN	OUT	Required records available: shellstock tags, parasite destruction			IN	OUT	Compliance with approved Specialized Process and HACCP plan		
		Protection from Contamination			The letter to the left of each item indicates that item's status at the time of the inspection. IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed COS = Corrected On Site R = Repeat item				
IN	OUT	Food separated and protected							
IN	OUT	Food-contact surfaces cleaned & sanitized							
IN	OUT	Proper disposition of returned, previously served, reconditioned, and unsafe food							

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

IN	OUT	Safe Food and Water	COS	R	IN	OUT	Proper Use of Utensils	COS	R
		Pasteurized eggs used where required					In-use utensils: properly stored		
		Water and ice from approved source					Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control					Single-use/single-service articles: properly stored, used		
		Adequate equipment for temperature control					Gloves used properly		
		Approved thawing methods used					Utensils, Equipment and Vending		
		Thermometers provided and accurate					Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification					Warewashing facilities: installed, maintained, used; test strips used		
		Food properly labeled; original container					Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
		Insects, rodents, and animals not present					Hot and cold water available; adequate pressure		
		Contamination prevented during food preparation, storage and display					Plumbing installed; proper backflow devices		
		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry					Sewage and wastewater properly disposed		
		Wiping cloths: properly used and stored					Toilet facilities: properly constructed, supplied, cleaned		
		Fruits and vegetables washed before use					Garbage/refuse properly disposed; facilities maintained		
							Physical facilities installed, maintained, and clean		

Person in Charge Title: David Green Date: 10-21-163
 Inspector: Steve M. Gibson Telephone No. 568 4593 EPHS No. 1539 Follow-up: Yes No
 Follow-up Date: _____

Next month



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

TIME IN: 2:08
 TIME OUT: 2:25
 PAGE 2 of 2

ESTABLISHMENT NAME: <u>Sonnip</u>		ADDRESS: <u>David Green</u>		CITY: <u>Dexter</u>	ZIP: <u>63841</u>
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/LOCATION		TEMP.

Code Reference	PRIORITY ITEMS Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.	Correct by (date)	Initial
460.11	Grease buildup - Hood vent dirty - Clean	10/31	

Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.	Correct by (date)	Initial
650.11	Ceiling tiles contains stain - Clean	10/31	
3304	utensils stored improperly - Store properly		
6202	unshielded light over grill - shield		
650.12	Bugs in light - Restrooms - clean		
650.13	Backdoor contains gaps (screen door) =>		

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: <u>David J. Green</u>	Date: <u>10-21-16</u>
Inspector: <u>David J. Green</u>	Follow-up: <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Telephone No: <u>568-4593</u>	Follow-up Date: <u> </u>
EPHS No: <u>1539</u>	



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

12:50
TIME IN: 7:00 TIME OUT: 1:15
PAGE 1 of 2

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: Sonny's OWNER: David Green PERSON IN CHARGE: David Green
 ADDRESS: 17 N Locust COUNTY: Stockland
 CITY/ZIP: Dexter 63841 PHONE: 890 7999 FAX: _____ P.H. PRIORITY: H M L
 ESTABLISHMENT TYPE
 BAKERY C. STORE CATERER DELI GROCERY STORE INSTITUTION MOBILE VENDORS
 RESTAURANT SCHOOL SENIOR CENTER SUMMER F.P. TAVERN TEMP. FOOD
 PURPOSE
 Pre-opening 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 _____

RISK FACTORS AND INTERVENTIONS

Risk factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
IN OUT	Person in charge present, demonstrates knowledge, and performs duties			IN OUT N/A N/A	Proper cooking, time and temperature		
	Employee Health			IN OUT N/A N/A	Proper reheating procedures for hot holding		
IN OUT	Management awareness; policy present			IN OUT N/A N/A	Proper cooling time and temperatures		
IN OUT	Proper use of reporting, restriction and exclusion			IN OUT N/A N/A	Proper hot holding temperatures		
	Good Hygienic Practices			IN OUT N/A	Proper cold holding temperatures		
IN OUT N/A	Proper eating, tasting, drinking or tobacco use			IN OUT N/A N/A	Proper date marking and disposition		
IN OUT N/A	No discharge from eyes, nose and mouth			IN OUT N/A N/A	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands			IN OUT N/A	Consumer Advisory		
IN OUT N/A	Hands clean and properly washed			IN OUT N/A	Consumer advisory provided for raw or undercooked food		
IN OUT N/A	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
IN OUT	Adequate handwashing facilities supplied & accessible			IN OUT N/A N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source			IN OUT N/A	Chemical		
IN OUT	Food obtained from approved source			IN OUT N/A	Food additives: approved and properly used		
IN OUT N/A N/A	Food received at proper temperature			IN OUT	Toxic substances properly identified, stored and used		
IN OUT	Food in good condition, safe and unadulterated			IN OUT N/A	Conformance with Approved Procedures		
IN OUT N/A N/A	Required records available: shellstock tags, parasite destruction			IN OUT N/A	Compliance with approved Specialized Process and HACCP plan		
	Protection from Contamination			The letter to the left of each item indicates that item's status at the time of the inspection. IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed COS = Corrected On Site R = Repeat Item			
IN OUT N/A	Food separated and protected						
IN OUT N/A	Food-contact surfaces cleaned & sanitized						
IN OUT N/A	Proper disposition of returned, previously served, reconditioned, and unsafe food						

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

IN	OUT	Safe Food and Water	COS	R	IN	OUT	Proper Use of Utensils	COS	R
N/A		Pasteurized eggs used where required			✓		In-use utensils: properly stored		
		Water and ice from approved source				✓	Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control				✓	Single-use/single-service articles: properly stored, used		
✓	N/A	Adequate equipment for temperature control				N/A	Gloves used properly		
✓		Approved thawing methods used				✓	Utensils, Equipment and Vending		
		Thermometers provided and accurate				✓	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification				✓	Warewashing facilities: installed, maintained, used; test strips used		
		Food properly labeled; original container				✓	Nonfood-contact surfaces clean		
		Prevention of Food Contamination				✓	Physical Facilities		
✓		Insects, rodents, and animals not present				✓	Hot and cold water available; adequate pressure		
✓		Contamination prevented during food preparation, storage and display				✓	Plumbing installed; proper backflow devices		
		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry				✓	Sewage and wastewater properly disposed		
		Wiping cloths: properly used and stored				✓	Toilet facilities: properly constructed, supplied, cleaned		
N/A		Fruits and vegetables washed before use				✓	Garbage/refuse properly disposed; facilities maintained		
						✓	Physical facilities installed, maintained, and clean		

Person in Charge / Title: David Green Date: 9/23/2016
 Inspector: Steve H. Agnew Telephone No. 568 4593 EPHS No. 1539
 Follow-up: Yes No
 Follow-up Date: 10/18/16



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

12:56
TIME IN 1:00 TIME OUT 1:15
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ESTABLISHMENT NAME Jonny's		ADDRESS 17N Locust		CITY Dexter	ZIP 63841
FOOD PRODUCT/LOCATION Onion		TEMP. 39°	FOOD PRODUCT/LOCATION		TEMP.

Code Reference	PRIORITY ITEMS Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.	Correct by (date)	Initial
3201.11	2 tone canned items - mason jam - removed by owner	9/30	CS
4601.11A	Grill contains food debris and grease buildup from equipment contains food debris and grease build-up - Clean	9/30	

Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.	Correct by (date)	Initial
6501.11	Ceiling tiles contain staining by Grill feedroom	9/30	
4601.11C	Both refrigerators holding food - Dirty - rust - old - exterior cleaned - repair	9/30	
6301.14	no handwashing signage at hot sink		
3304.12	utensils stored improperly - single surface with cut handles facing opening		
3307.11	personal foods - canned - unidentified - stored with other foods		
6202.11	Unshielded lights over Grill area - Shield		
4401	Exposed wood - storage cabinet - seal/paint		
6501.114	illuminated area under cabinet - near refrigerator		
6202.15	Back door screen door broken contains outer opening - repair		
6501.12	both restrooms men's women's dirty - walls floors light contains bugs - Clean		
3302.12	Food / no labels - label date		
6501.12	all floors dirty - Clean		

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: **David Sharp** Date: **9/23/16**

Inspector: **Eric McAlister** Telephone No: **3604593** EPHS No: **1539** Follow-up: Yes No Follow-up Date: **10/18/16**

Work rise son gave handwashing signs