



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

TIME IN: 12:00 TIME OUT:  
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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: Huddle House OWNER: JUSTIN HARWELL PERSON IN CHARGE: SASHA SHELLEY  
 ADDRESS: 1019 W HWY 60 COUNTY:  
 CITY/ZIP: DEXTER 63841 PHONE: 625-5300 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
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Person in charge present, demonstrates knowledge, and performs duties			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/O N/A	Proper cooking, time and temperature		
	<b>Employee Health</b>			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/O N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Management awareness; policy present			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/O N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/O N/A	Proper hot holding temperatures		
	<b>Good Hygienic Practices</b>			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/O	Proper eating, tasting, drinking or tobacco use			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/O N/A	Proper date marking and disposition		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/O	No discharge from eyes, nose and mouth			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/O N/A	Time as a public health control (procedures / records)		
	<b>Preventing Contamination by Hands</b>			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/A	<b>Consumer Advisory</b>		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/O	Hands clean and properly washed				Consumer advisory provided for raw or undercooked food		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				<b>Highly Susceptible Populations</b>		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
	<b>Approved Source</b>			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/A	<b>Chemical</b>		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Food obtained from approved source			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Food additives: approved and properly used		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/O N/A	Food received at proper temperature			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Food in good condition, safe and unadulterated				<b>Conformance with Approved Procedures</b>		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/O N/A	Required records available: shellstock tags, parasite destruction			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/A	Compliance with approved Specialized Process and HACCP plan		
	<b>Protection from Contamination</b>			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 COS = Corrected On Site R = Repeat Item			
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/A	Food separated and protected						
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/A	Food-contact surfaces cleaned & sanitized						
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT N/O	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		
/	/	<b>Food Temperature Control</b>			/	/	Single-use/single-service articles: properly stored, used		
/	/	Adequate equipment for temperature control			/	/	Gloves used properly		
/	/	Approved thawing methods used			/	/	<b>Utensils, Equipment and Vending</b>		
/	/	Thermometers provided and accurate			/	/	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
/	/	<b>Food Identification</b>			/	/	Warewashing facilities: installed, maintained, used; test strips used		
/	/	Food properly labeled; original container			/	/	Nonfood-contact surfaces clean		
/	/	<b>Prevention of Food Contamination</b>			/	/	<b>Physical Facilities</b>		
/	/	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: Sasha Shelley GM Date: 6/16/17  
 Inspector: William A. Brandel Telephone No. 568-4593 EPHS No. 1582 Follow-up:  Yes  No  
 Follow-up Date: N/A