

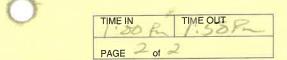
MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BUREAU OF ENVIRONMENTAL HEALTH SERVICES FOOD ESTABLISHMENT INSPECTION REPORT

TIME IN	TIME OUT
PAGE / C	r 2

NEXT DOLLTING INCOM	TION THIS DAY, THE ITEMS NO CTION, OR SUCH SHORTER PE FOR CORRECTIONS SPECIFIE	RIOD OF TIME AS M	AY BE SPE	CIFIED II	1 WRII	ING BY 1F	IE KEGL	ACILITIES WHICH MUST BE CORRE JLATORY AUTHORITY. FAILURE TO OPERATIONS.	COMPLY	Y THE		
ESTABLISHMENT NAME: OWNER:						PERSON IN CHARGE:						
ADDRESS: 509 HWY 255						COUNTY:						
CITVIZID: PHONE: FF					FAX: P.H. PRIORITY: ☐ H ☐ M 🔟 L							
BLOOM FIEL 63825 568-3624					F.H. PRIORITT.							
						☐ GROCERY STORE ☐ INSTITUTION ☐ MOBILE VENDORS						
PURPOSE Pre-opening	Routine Follow-up	☐ Complaint [Other									
FROZEN DESSERT Approved Disapproved Not Applicable License No. PRIVATE												
		RISK FAC										
Risk factors are food	preparation practices and employeeaks. Public health intervention	e behaviors most con	nmonly repor	rted to the	e Cente	ers for Dise	ase Con	trol and Prevention as contributing factor	rs in			
Compliance	Personatration of K		COS	R Con	pliance	-		Potentially Hazardous Foods	COS	S R		
IN OUT	Person in charge present, demo	nstrates knowledge,		IN (DUT N	O N/A	Proper o	cooking, time and temperature				
	Employee He			The state of the s	OUT N/O N/A Proper reheating procedures for hot holding							
IN OUT	Management awareness; policy Proper use of reporting, restricti	present on and exclusion				I/O N/A Proper cooling time and temperatures I/O N/A Proper hot holding temperatures						
	Good Hyglenic Pr	actices		dN (N/A /O N/A	Proper of	cold holding temperatures date marking and disposition				
IN OUT N/O	Proper eating, tasting, drinking of No discharge from eyes, nose a	nd mouth				/O N/A	Time as	a public health control (procedures /				
	Preventing Contaminat			-			records)	Consumer Advisory				
IN OUT N/O	Hands clean and properly wash			IN C	TUC	N/A Consumer advisory provided for raw or undercooked food						
IN OUT N/O	No bare hand contact with read						Gildoroo	Highly Susceptible Populations				
IN OUT	approved alternate method prop Adequate handwashing facilities	erly followed supplied &		IN (DUT N	N/O N/A Pasteurized foods used, prohibited foods no		ized foods used, prohibited foods not				
accessible			-			offered	Chemical					
Approved Source Food obtained from approved source			IN C		N/A Food additives: approved and properly used Toxic substances properly identified, stored an							
OUT N/O N/A Food received at proper temperature			(IN)	JUT		used						
NOUT Food in good condition, safe and unadulterated			IN C	OLIT.	(N/A)		iformance with Approved Procedures ance with approved Specialized Process					
IN OUT N/O N/A Required records available: shellstock tags, parasite destruction								CCP plan		_		
Protection from Contamination N/A Food separated and protected			The	letter to	the left of	each iter	m indicates that item's status at the time	of the				
IN OUT N/A Food-contact surfaces cleaned & sanitized			inspection. IN = in compliance OUT = not in compliance									
IN OUT N/O Proper disposition of returned, previously served,			N/A = not applicable N/O = not observed COS = Corrected On Site R = Repeat Item									
reconditioned, and unsafe food GOOD RETAIL PRACTICES												
	Good Retail Practices are preven	tative measures to co	ntrol the intr	oduction	of path	ogens, che	micals, a	and physical objects into foods.	000	I D		
IN OUT	Safe Food and Water		COS R	IN	OUT	In-use ute	ensils: pr	Proper Use of Utensils roperly stored	cos	R		
Pasteurized eggs used where required Water and ice from approved source			1		Utensils, equipment and linens: properly stored, dried,							
Food Temperature Control			1		handled Single-use/single-service articles: properly stored, used							
Adequate equipment for temperature control			1		Gloves us							
Approved thawing methods used Thermometers provided and accurate			V		Food and nonfood-contact surfaces cleanable, properly							
Food Identification			-		designed, constructed, and used Warewashing facilities: installed, maintained, used; test							
			V		strips used Nonfood-contact surfaces clean							
Food properly labeled; original container Prevention of Food Contamination						Physical Facilities						
Insects, rodents, and animals not present Contamination prevented during food preparation, storage			V				er available; adequate pressure d; proper backflow devices					
and display Personal cleanliness: clean outer clothing, hair restraint,			<i>p</i>		Sewage a	and wast	tewater properly disposed					
fingernails and jewelry			AL .	V	Toilet facilities: properly constructed, supplied, cleaned							
	Wiping cloths: properly used and stored Fruits and vegetables washed before use		~		Garbage/	refuse p	roperly disposed; facilities maintained					
					X	Physical		installed, maintained, and clean Date:	1			
Felsoli III Citalge Titue.												
Inspector:	A. BRANDEL	Telep	hone No.	3		EPHS No		Follow-up:	JE N	40		
OUT ILLI H IVE	The Desire Land	DISTRIBUTION WHITE		PY	- 12	CANARY - FIL				E6 37		



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



F07 A F1 101 11 151	TAIAME	ADDRESS	CITY		ZIP		
ESTABLISHMEN		Lag II		EN FEA	43825	_	
FOOD PRODUCT/LOCATION TEMP. FOOD PRODUCT/ LOCATION				TEMP.			
1 - KE	ER COOLER NOT W	DORK. J6					
, , , ,							
- A-11	OTHER TENTS GOOD	3					
PECC	OTHER INDICES						
			DEED, ITEMA		Correct by	Initial	
Code	Priority itams contribute directly to the elin	PHIC nination prevention or re	DRITY ITEMS eduction to an acceptable level, hazards associated	d with foodborne illness	(date)	1) I) CICAI	
Reference	or injury. These items MUST RECEIVE II	MMEDIATE ACTION wi	ithin 72 hours or as stated.				
	-						
_							
		×					
			ORE ITEMS		Correct by	Initial	
Code Reference	Core items relate to general sanitation, or	porational controls facility	ties or structures, equipment design, general maint	enance or sanitation	(date)		
	standard operating procedures (SSOPs).	These items are to be	corrected by the next regular inspection or as	stated.			
				(2) and (1) and			
6-50	1.11 CIELING MISS	116/DA-	ACED THE IN WOME.	13 KESTERON	\		
	- REPAR RE	PLANE					
4-30	II BEER CONE	K NOT	COOL NG - REPAIR/R	EFLACE			
	111						
- 3							
		EDUCATION	PROVIDED OR COMMENTS				
Person in Ch	parge /Title: /// // // //			Date:			
	OH I DO			7 28	Vac I	No.	
Inancator	180	Telepho	one No. EPHS No.	Follow-up:	Yes	No No	
Inspector:	AM A. BRANDEL	277	ピンダードく ケグ ノイリ フ	Follow-up Date:	112 F		

MO 580-1814 (9-13)