

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

TIME IN	DA-	TIME OUT
PAGE	of	

NEXT ROUTINE IN WITH ANY TIME LI	NSPECTION IN INTERNITY OF COMMERCE	ON, OR SUCH SHORTER PE OR CORRECTIONS SPECIFIE	RIOD OF TIMED IN THIS N	ME AS M OTICE N	AY BE	SPEC	IFIED I	N WR	ITING BY 1	THE REGU	ACILITIES WHICH MUST BE CORRECT JLATORY AUTHORITY. FAILURE TO (1) OPERATIONS.	TED BY	THE Y	
ESTABLISHMENT NAME: OWNER:						_6	C				PERSON IN CHARGE:	20	}	
ADDRESS: 909 W BUSINESS 60											COUNTY:			
CITY/ZID: PHONE:							FAX:					4 🗆 1		
ESTABLISHMENT TYPE							P.H. PRIORITY: H M L							
BAKERY C. STORE CATERER DELI SCHOOL SENIOR CENTER TEMP. FOOD						DD	☐ GROCERY STORE ☐ INSTITUTION ☐ MOBILE VENDORS							
PURPOSE Pre-opening Routine Follow-up Other														
FROZEN DESSERT □ Approved □ Disapproved □ Not Applicable License No. □ PUBLIC □ PRIVATE				IC	SAL						ON-COMMUNITY PRIVAT Results		575507AA	
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 K	nowledge		cos		Compliance Pol				Potentially Hazardous Foods	COS	R	
IN OUT	OUT Person in charge present, demonstrates and performs duties			wledge,			IN OUT N/O N/A Proper of			Proper o	cooking, time and temperature			
Employee Health			Market Comment	-					N/O N/A		reheating procedures for hot holding cooling time and temperatures			
IN OUT				sion			IN	OUT N/O N/A Proper h			not holding temperatures			
ON OUT N/O	Pi	Good Hygienic Proper eating, tasting, drinking of		e				OUT	N/A N/O N/A		cold holding temperatures date marking and disposition			
IN OUT N/O		o discharge from eyes, nose a							N/O N/A	Time as	a public health control (procedures /			
		Preventing Contaminat	on by Hands							records)	Consumer Advisory			
IN OUT N/O							IN	OUT	(N/A		er advisory provided for raw or oked food			
OUT N/O		o bare hand contact with read		or			1				Highly Susceptible Populations			
IN OUT	approved alternate method prop IN OUT Adequate handwashing facilities				IN OL			OUT	N/O N/A	O N/A Pasteurized foods used, prohibited foods not				
accessible						_	offered				Chemical			
Approved So. IN OUT Food obtained from approved so		ource								ditives: approved and properly used				
IN OUT N/O N/A Food received at proper temper		ature			IN OUT				Toxic su used	bstances properly identified, stored and				
IN OUT Food in good condition, safe and						IN OUT THE			formance with Approved Procedures ince with approved Specialized Process					
IN OUT N/O N/A Required records available: shells destruction			listock tags, p	arasite							CCP plan			
IN OUT N/A	Λ E	Protection from Contamination A Food separated and protected								f each iten	n 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				ved.	N/A = not applicable					le	N/O = not observed R = Repeat Item			
reconditioned, and unsafe food								Offected Of	ii oite	Trepeat tient		_		
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		P	roper Use of Ulensils	cos	R	
Pasteurized eggs used where required Water and ice from approved source						4		Utensils	, equipme	operly stored nt and linens: properly stored, dried,				
Food Temperature Contro		irol				~		handled Single-u		service articles: properly stored, used				
	Adequate equipment for temperature control						1			used prope	erly			
	Approved thawing methods used Thermometers provided and accurate						-			d nonfood	s. Equipment and Vending I-contact surfaces cleanable, properly cted, and used			
	Food Identification						1			shing facil	lities: installed, maintained, used; test			
VF	Food properly labeled; original container						1				surfaces clean			
V	Insects, rodents, and animals not present						/		Hot and	cold wate	Physical Facilities r available; adequate pressure			
Contamination prevented during food preparation, sto			orage			1				; proper backflow devices				
Personal cleanliness: clean outer clothing, hair restraint,			int,			1		Sewage	and waste	ewater properly disposed				
		gernails and jewelry ping cloths: properly used and stored					1		Toilet fa	cilities: pro	operly constructed, supplied, cleaned			
	Fruits and vegetables washed before use					1		Garbage	e/refuse pr	roperly disposed; facilities maintained installed, maintained, and clean				
Person in Charge /Title: Date:														
Inchestor				Teleph	none N	lo.		1	EPHS N	0 5	Follow-up:	n N	lo	
Inspector: Telephone No. 528-45					5 9	13		1582		Follow-up Date:				