



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

TIME IN 11:30AM	TIME OUT 1:55PM
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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: MOR IN A'S	OWNER: MIKE KIRKLAND/ROSE NOBLE	PERSON IN CHARGE: MIKE KIRKLAND
ADDRESS: 903 BUSINESS 60 WEST	COUNTY: STODDARD	
CITY/ZIP: DEXTER 63841	PHONE: 624-6633	FAX:
P.H. PRIORITY: <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L		

ESTABLISHMENT TYPE

- | | | | | | |
|--|-----------------------------------|--|-------------------------------------|--|---|
| <input type="checkbox"/> BAKERY | <input type="checkbox"/> C. STORE | <input type="checkbox"/> CATERER | <input type="checkbox"/> DELI | <input type="checkbox"/> GROCERY STORE | <input type="checkbox"/> INSTITUTION |
| <input checked="" type="checkbox"/> RESTAURANT | <input type="checkbox"/> SCHOOL | <input type="checkbox"/> SENIOR CENTER | <input type="checkbox"/> TEMP. FOOD | <input type="checkbox"/> TAVERN | <input type="checkbox"/> MOBILE VENDORS |

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/O N/A	Proper cooking, time and temperature		
IN OUT	Employee Health			IN OUT N/O N/A	Proper reheating procedures for hot holding		
IN OUT	Management awareness; policy present			IN OUT N/O N/A	Proper cooling time and temperatures		
IN OUT	Proper use of reporting, restriction and exclusion			IN OUT N/O N/A	Proper hot holding temperatures		
IN OUT	Good Hygienic Practices			IN OUT N/A	Proper cold holding temperatures		
IN OUT N/O	Proper eating, tasting, drinking or tobacco use			IN OUT N/O N/A	Proper date marking and disposition		
IN OUT N/O	No discharge from eyes, nose and mouth			IN OUT N/O N/A	Time as a public health control (procedures / records)		
IN OUT N/O	Preventing Contamination by Hands			IN OUT N/A	Consumer Advisory		
IN OUT N/O	Hands clean and properly washed				Consumer advisory provided for raw or undercooked food		
IN OUT N/O	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/O N/A	Pasteurized foods used, prohibited foods not offered		
IN OUT	Approved Source			IN OUT N/A	Chemical		
IN OUT N/O N/A	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 N/O N/A	Required records available: shellstock tags, parasite destruction			IN OUT N/A	Compliance with approved Specialized Process and HACCP plan		
IN OUT N/A	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 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/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				X	Utensils, equipment and linens: properly stored, dried, handled		
/		Food Temperature Control				X	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				X	Nonfood-contact surfaces clean		
/		Prevention of Food Contamination					Physical Facilities		
/		Insects, rodents, and animals not present			/		Hot and cold water available; adequate pressure		
/	X	Contamination prevented during food preparation, storage and display				X	Plumbing installed; proper backflow devices		
/		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry				X	Sewage and wastewater properly disposed		
/		Wiping cloths: properly used and stored			/		Toilet facilities: properly constructed, supplied, cleaned		
/		Fruits and vegetables washed before use				X	Garbage/refuse properly disposed; facilities maintained		
						X	Physical facilities installed, maintained, and clean		

Person in Charge / Title: [Signature]	Date: 6-13-18
Inspector: WILLIAM A. BRANDEL	Telephone No. 566-4593
EPHS No. 1582	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Follow-up Date: 6-27-18



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ESTABLISHMENT NAME MORINA'S		ADDRESS 403 BUSINESS 60 WEST		CITY DEALER	ZIP 63841	
FOOD PRODUCT/LOCATION COLD FRET TABLES X2		TEMP. 38°	FOOD PRODUCT/LOCATION WALK IN REF.		TEMP. 36°	
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
3-201.11	FOODS IN WALK IN FRIDGE NOT LABELED - MARK/DATE ALL					
6-201.11A						
5-403.11	MOP WATER DUMPED OUTSIDE - CANNOT DUMP MOP WATER OUTSIDE - MUST USE MOP SINK - INSTALL/REPAIR MOP SINK					
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
6-201.11A	CEILING MUST HAVE TILES IN PLACE TO PREVENT CONTAMINATION					
4-101.19	DOORS JAMS MUST BE FINISHED, REPLACE MISSING JAMS					
6-501.12A	FLOORS, COOKING IMPLEMENTS, FOOD/GREASE COVERED - CLEAN - CLEAN - CLEAN					
4-903.11	SINGLE SERVE CONTAINERS (DISHES) NOT INVERTED OR COVERED - MUST INVERT OR COVER TO PROTECT FROM CONTAMINANTS					
5-205.15B	HAND WASH SINK NOT DRAINING CORRECTLY - REPAIR					
6-501.11	BACK DOOR HAS LARGE GAPS - DO NOT SEAL TO PREVENT VERMIN - REPAIR/REPLACE - (REPEAT VIOLATION)					
EDUCATION PROVIDED OR COMMENTS						
Person in Charge Title:					Date: 6-13-18	
Inspector: WILLIAM A. BRANDEL		Telephone No. 588-4593		EPHS No. 1582	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Follow-up Date: 6-27-18	

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ESTABLISHMENT NAME MARINA'S		ADDRESS 903 BUSINESS 60 WEST		CITY DEXTER	ZIP
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/ LOCATION		TEMP.

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
	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.		

CORE ITEMS

6-101, 11 - LARGE HOLE IN FLOOR BY BACKLOADING
DOOR - FULL OF TRASH REPAIR

5-203.13 NO MOP SINK - REPAIR EXISTING

4.601.11 - CLEANING NEEDED:

OVENS
INSIDE PREP TABLES
BACKS & SIDE OF PREP TABLES
BUTCHER BLOCK SURFACES - GREASE COULDED
WIRE RACK SHELVES - CLEAN & GREASE-COVER
ALL FLOORS NEED SCRUBBED TO WALLS
FIRE EXTINGUISHER
EXHAUST FAN / RANGE HOOD GREASE TRAYS

Code Reference	CORE ITEMS	Correct by (date)	Initial
	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.		

[illegible]

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: <i>[Signature]</i>		Date: <i>6-13-18</i>	
Inspector: <i>William A. BRANDELL</i>	Telephone No. <i>568-4513</i>	EPHS No. <i>1582</i>	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Follow-up Date: <i>6-27-18</i>