

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

TIMBIN 50	TIME OUT 30
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									GULATORY AUTHORITY, FAILURE OD OPERATIONS.	TO COMP	PLY
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.  ESTABLISHMENT NAME: OWNER: PERSON IN CHARGE:							10.00				
ADDRESS: 2/7 E Jajajourt									COUNTY	nen	
GITY/ZIP: 1 271/C PHONE: 256/// FAX:									1/103/30/19P		
ESTABLISHMENT TYP	10111 63645	1049-	3000	/					P.H. PRIORITY : A H	□ M □	L
☐ BAKERY ☐ RESTAURAN	C STORE CATER	ER DI	ELI MP. FOOD	)		ROCE AVERN	RY STOR		☐ INSTITUTION ☐ MOBILE VENDORS		
PURPOSE Pre-opening	Routine	☐ Complaint	Other								
FROZEN DESSE	RT pproved Not Applicable	SEWAGE DISP	OSAL			R SUI			NON-COMMUNITY   PRI	/ATE	
License No.	pproved A Not Applicable	PRIVATE		1	H C	OIVIIVIC	JNITT			sults	
		RISK FA	CTORS A	ND I	INTER	RVENT	TIONS		2,1		100
	od preparation practices and employ tbreaks. Public health intervention								control and Prevention as contributing	actors in	
Compliance	Demonstration of K		cos	R		npliance			Potentially Hazardous Foods	C	OS F
IN OUT	Person in charge present, dem and performs duties	onstrates knowledge			IN	OUT	10 N/A	Prope	er cooking, time and temperature		
	Employee He	alth			. IN	OUTIN	I/O N/A	Prope	er reheating procedures for hot holdin		
JN OUT	Management awareness; polic						1/Q N/A		er cooling time and temperatures		
IN) OUT	Proper use of reporting, restrict	ion and exclusion		(			I/O N/A		er hot holding temperatures		
<b>7</b>	Good Hygienic P			3	ZIN<		N/A		er cold holding temperatures		
IN OUT N/O	Proper eating, tasting, drinking		4	(			I/O N/A	Prope	er date marking and disposition as a public health control (procedures	,	_
IN OUT N/O	No discharge from eyes, nose				IIN	001 N	I/Q N/A	record	ds)	/	
IN OUT N/O	Preventing Contamina Hands clean and properly wash				IN	OUT	N/A	Consi	Consumer Advisory umer advisory provided for raw or		
IN OUT N/O	No bare hand contact with read	v-to-eat foods or		- (	_			under	rcooked food Highly Susceptible Populations		-
IN OUT	approved alternate method pro Adequate handwashing facilitie	perly followed			INU	OUT N	/O N/A	Ponto	eurized foods used, prohibited foods n		
001	accessible			(	JIN T	001 10	I/O N/A	offere	ed .	л	
INCOLIT	Approved So				IN	OUT	NI/A	Food	Chemical additions approved and approved approved and approved and approved and approved and approved	- 7111	_
IN OUT N/O N/A	Food obtained from approved s Food received at proper tempe		_		IN	OUT	N/A		additives: approved and properly used substances properly identified, stored		-
0					1100			used			
IN OUT N/O N/A	Food in good condition, safe an Required records available: she				(IN)	OUT	N/A		Conformance with Approved Procedure oliance with approved Specialized Pro-		
	destruction Protection from Car						1.07		IACCP plan		
IN OUT N/A	Food separated and protected	tallillation		Н		letter to	the left of	f each i	tem indicates that item's status at the	ime of the	
IN OUT N/A	Food-contact surfaces cleaned	& sanitized			IN = in compliance  N/A = not applicable  OUT = not in compliance  N/O = not observed						
IN OUT N/O Proper disposition of returned, previously served, reconditioned, and unsafe food				COS = Corrected On Site R = Repeat Item							
	Togottationed, and another lood		OOD RET	AIL P	RACT	ICES					
11	Good Retail Practices are preven		The second second second				ogens, ch	emicals	and physical objects into foods.		
IN OUT	Safe Food and Wate			₹	IN	OUT			Proper Use of Utensils	COS	R
	steurized eggs used where required				X				properly stored		
Wa	ater and ice from approved source				X		Utensils handled		ment and linens: properly stored, dried	,	
	Food Temperature Cor	trol		_	X	_			le-service articles: properly stored, us	he	
Ad	equate equipment for temperature c				~		Gloves			, d	
	proved thawing methods used							Uter	nsils, Equipment and Vending		
The	ermometers provided and accurate				X				ood-contact surfaces cleanable, prope tructed, and used	ly	
	Food Identification	To 1			X		Warewa	shing fa	acilities: installed, maintained, used; te	st	
For	od properly labeled; original containe				X		strips us Nonfood		ct surfaces clean		
	Prevention of Food Contan				1				Physical Facilities		
	ects, rodents, and animals not presented during food a			_	X	V			ater available; adequate pressure lled; proper backflow devices		
Contamination prevented during food preparation, storage and display					X						
Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry					X		21		astewater properly disposed		
	ping cloths: properly used and store uits and vegetables washed before u			-	X				properly constructed, supplied, cleane properly disposed; facilities maintaine		
	and the supplementary of the s				X				es installed, maintained, and clean		
Person in Charge	Attle:	delicu							Date: 10-15-20	21,	
Inspector	10 Majain	Telep	phone No	2.	2/0	91	EPHS N	0/	Follow-up:  Yes	,EQ	No
4000	· · · · · · · · · · · · · · · · · · ·	DIOTOIDUTION: WILLIAM	- OWNERS	CODY	I	-	CANADY D	f conv	i ollow-up Date.		FC 27

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE



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ESTABLISHMEN	Plaire High School	ADDRESS E	Walnut	EUS+ PLAILE	ZIP 3849	
FO	OD PRODUCT/LOCATION	TEMP.	FOOD PRODUCT	1-1011	TEM	) ),
Ambigut Air (MA) blue 35°F AA Sandwich make-line						
AAm	He Cooler	227		(°001)		
Ancio	SSIC line comes	165F				
	Warmer					
Code Reference	Priority items contribute directly to the elin or injury. These Items MUST RECEIVE II	PRIORITION PRIVATE ACTION W	ORITY ITEMS reduction to an acceptable level, hazards	associated with foodborne illness	Correct by (date)	Initial
	Williams Hear Hells MOST RECEIVE	VIMEDIATE AGRICA W	dum remours of as stated.		100	
	MANA	0 1 + 4	Mistince			
	V L U.V		INI 3 ( II) CC			
			0			
				* *		
						200
						=
Code		C(	ORE ITEMS		Correct by	Initial
Reference	Core items relate to general sanitation, op- standard operating procedures (SSOPs).	These items are to be	s corrected by the next regular inspect	ion or as stated.	(date)	
5-205.1	5 Faucet on 3	bay sink	and handsink	lealerra	MOT	
	- TAUCE OIL J	3111/2	- Terror Vorustrik	180.2.10	MAL	
DE L		EDUCATION	PROVIDED OR COMMENTS			
	NRI = nixty	whire in	rszechan			
Person in Ch	narge /Title:	141.		Date: / /) / /	5 - 7/19	) /
Inspector:	1. Maria	Telepho	one Non a la EPHS No.	Follow-up:	Yes	No
UIN	10 Marin	- 3/5	665-2191 1681	Follow-up Date:		1