

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

TIME INS 5		TI	TIMEOUT					
PAGE	of	2						

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:  OWNER:				PERSON IN CHARGE:						
ADDRESS: 1015 Plant Rd					COUNTY:					
GITY/ZIP: (2834 PHONE: 2-3728				FAX: P.H. PRIORITY: D.H.D.M. D.L.						
ESTABLISHMENT TYPE  BAKERY RESTAURANT	☐ BAKERY ☐ C. STORE ☐ CATERER ☐ DELI ☐ GROCERY STORE ☐ INSTITUTION									
PURPOSE  Pre-opening		Other								
FROZEN DESSERT  Approved Disapproved Not Applicable License No.  SEWAGE DISPOSAL PUBLIC PRIVATE  WATER SUPPLY COMMUNITY NON-COMMUNITY PRIVATE Date Sampled Results										
	RISK FAC									
foodborne illness outbre	oreparation practices and employee behaviors most cor eaks, Public health interventions are control measure	s to preven	it foc	odbor	ne illne	ess or injury	te and the second secon			
Compliance  OUT	Demonstration of Knowledge Person in charge present, demonstrates knowledge,	cos	R		nplianc	N/O N/A	Potentially Hazardous Foods COS R Proper cooking, time and temperature			
	and performs duties  Employee Health			IN OUT(N/Q N/A Proper rel		-9-	Proper reheating procedures for hot holding			
IN OUT	Management awareness; policy present  Proper use of reporting, restriction and exclusion	1					Proper cooling time and temperatures  Proper hot holding temperatures			
IN OUT N/O	Proper eating, tasting, drinking or tobacco use			IN OUT N/A Proper col			Proper cold holding temperatures  Proper date marking and disposition			
OUT N/O	No discharge from eyes, nose and mouth					N/O N/A	Time as a public health control (procedures / records)			
(IN/OUT N/O	Preventing Contamination by Hands Hands clean and properly washed			iN	OUT	N/A)	Consumer Advisory  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 &			(IN)			Pasteurized foods used, prohibited foods not			
accessible Approved Source				0	offered Chemical		Chemical			
IN OUT N/O N/A	Food obtained from approved source Food received at proper temperature		-	-	IN OUT Toxic substances properly in		Food additives: approved and properly used  Toxic substances properly identified, stored and			
IN OUT N/O N/A Required records available: shellstock tags, parasite				Used  Conformance with Approved Procedures  (IN) OUT N/A Compliance with approved Specialized Process			Conformance with Approved Procedures			
destruction  Protection from Contamination			-1				and HACCP plan			
IN OUT N/A Food separated and protected				The letter to the left of each item indicates that item's status at the time of the inspection.						
IN OUT N/A Food-contact surfaces cleaned & sanitized  IN OUT N/O Proper disposition of returned, previously served,				IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed						
114 001 140	reconditioned, and unsafe food					orrected Or	n Site R = Repeat Item			
	Good Retail Practices are preventative measures to co			uction	of pat	hogens, ch				
IN OUT Paste	Safe Food and Water urized eggs used where required	COS R		IN	OUT	In-use u	Proper Use of Utensils COS R tensils: properly stored			
Water and ice from approved source				1			, equipment and linens: properly stored, dried,			
Food Temperature Control  Adequate equipment for temperature control						Single-u	se/single-service articles: properly stored, used used properly			
Approved thawing methods used							Utensils, Equipment and Vending d nonfood-contact surfaces cleanable, properly			
Thermometers provided and accurate						designe	d nonrood-contact surfaces cleanable, properly d, constructed, and used shing facilities: installed, maintained, used; test			
Food Identification			_			strips us	ed			
Food properly labeled; original container  Prevention of Food Contamination				+			I-contact surfaces clean Physical Facilities			
Insects, rodents, and animals not present  Contamination prevented during food preparation, storage				+			cold water available; adequate pressure g installed; proper backflow devices			
and display  Personal cleanliness: clean outer clothing, hair restraint,						Sewage	and wastewater properly disposed			
fingernails and jewelry Wiping cloths: properly used and stored				1			cilities: properly constructed, supplied, cleaned			
	and vegetables washed before use			V	X		e/refuse properly disposed; facilities maintained  I facilities installed, maintained, and clean			
Person in Charge /Title: Date: 5 // - 2022										
Inspector:  Telephone No.   EPHS No.   Follow-up:   Yes   No   Follow-up Date:   Yes   Y										



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

TIME IN 55	TIME OUS
PAGE of	

ESTABLISHMEN		1015 Plan	nt Rd	markston	U343	2/
10	DD PRODUCT/LOCATION	TEMP.	FOOD PRODUCT/	LOCATION	TEMP	
Ambie	OF ATO CHAY WALK-IN	3/ AA	milk coole	gni cover	30	
	Stilline weimer	1681				
AFFI TY	Coller	37.1				
Code Reference	Priority items contribute directly to the elimina	PRIORITY ITEM	S	amandated with the thomas library	Correct by (date)	Initial
Neielelice	or injury. These Items MUST RECEIVE IMM	DIATE ACTION within 72 hou	rs or as stated.	associated with loodborne liness.	(date)	7.75
	none	at this	time			
	Morre					
		.,				
· y-				- 1		
- AT						
Code Reference	Core items relate to general sanitation, operat standard operating procedures (SSOPs). The	CORE ITEMS ional controls, facilities or structi	ures, equipment design, gene	eral maintenance or sanitation	Correct by (date)	Initial
	standard operating procedures (SSOPs). The	se items are to be corrected i	by the next regular inspecti	on or as stated.	9 70 000	7 A 1
6-501.11	of-lours, huld to	he cleaned	due to di	rt and	MRI	
×	tood debrs.					
				1		
						· C
			*	· ·		
FIEL		EDUCATION PROVIDED	O OR COMMENTS	2 2 2 2 3 4 4 5 N	MUTEL	10
	NRI: rext rout	me insuc	tion			
Person in Charge /Title: Date: 5 / -						
Inspector:	dia Mariero	Zelephone No. ?	2191 EPHS.No./	Follow-up:	Yes X	No
40 000	ale Magani	)/) (/0)	11/1/1/01	Follow-up Date:	, ,	E0.031