

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

TIME: 17/5	TIME ON T
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MEXT ROUTINE INSPECTION THIS DAY, THE FIEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OF FALILITIES 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:							DITT GOL	PERSON IN CHARGE:					
ADDRESS: 10 WILLERSON						COUNTY: SSISSION				POI	J		
CITYIZIP: Prairie 13845 PHONE; -3007				7	FAX:				P.H. PRIORITY	Н П М			
ESTABLISHMENT TYPE  BAKERY  C. STORE  CATERER  DELI  RESTAURANT  SCHOOL  SENIOR CENTER  TEMP. FOOD					OD	☐ GROCERY STORE ☐ INSTITUTION ☐ TAVERN ☐ MOBILE VENDORS							
PURPOSE    Pre-opening   Routine   Follow-up   Complaint   Other													
FROZEN DESSERT  Approved Disapproved Mot Applicable License No.  SEWAGE DISPO				OSAL		The second secon			PRIVATE Results				
RISK FACTORS AND INTERVENTIONS													
foodborne illne:	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 IN OUT		Demonstration of K Person in charge present, demo		COS	S R		npliance	per la company de la company d	Proper	Potentially Hazardous Foo cooking, time and temperatur		cos	R
<u> </u>		and performs duties											
(IN) OUT		Employee He Management awareness; policy						/O N/A					
IN) OUT		Proper use of reporting, restrict	ion and exclusion					N/O N/A Proper hot holding temperatures					
IN OUT N/O		Good Hygienic P Proper eating, tasting, drinking				/IN		N/A Proper cold holding temperatures  /O N/A Proper date marking and disposition				j	
OUT N/O		No discharge from eyes, nose a				IN					edures /		
IN OUT N/O Preventing Contamination by Hands Hands clean and properly washed					IN	OUT	N/A Consumer advisory provided for raw		or				
IN OUT N/O  No bare hand contact with ready-to-eat foods or approved alternate method properly followed								undercooked food Highly Susceptible Populations		ons			
IN OUT Adequate handwashing facilities supplied & accessible						IN OUT N/O N/A Pasteurized foods used, prohibited foods n offered		oods not					
IN OUT		Approved So				Chemical IN OUT N/A Food additives: approved and properly used			thy used				
IN OUT NO N/A Food obtained from approved source  IN OUT N/O N/A Food received at proper temperature						OUT	IN/A	Toxic su	ubstances properly identified,				
(IN)OUT		Food in good condition, safe an	d unadulterated				-		used	formance with Approved Pro	cedures		
IN OUT N/O N/A Required records available: shellstock tags, parasite destruction					INC	OUT	N/A Compliance with approved Specialized Process and HACCP plan						
Protection from Contamination  IN OUT N/A Food separated and protected							the left of	f each iter	n indicates that item's status	at the time o	f 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, reconditioned, and unsafe food					N/A = not applicable N/O = not observed COS = Corrected On Site R = Repeat Item								
	CO.		TARREST CO.	OOD RI							N N E		X.
IN OUT	. Vi	Good Retail Practices are prever Safe Food and Water		COS	R	IN	OUT	ogens, ch	THE RESERVE AND ADDRESS OF THE PERSON.	Proper Use of Utensils		cos	R
		urized eggs used where required				V				operly stored	4 40 4		
1	vvater	ater and ice from approved source				4		handled		ent and linens: properly stored	a, ariea,		
	Aden	Food Temperature Control uate equipment for temperature control					Single-use/single-service articles: properly stored, used Gloves used properly						
1	Appro	ved thawing methods used	Jillion .						Utensi	ls, Equipment and Vending			
-	Therm	mometers provided and accurate				1			Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used				
	Food Identification				100		Warewa	shing faci	lities: installed, maintained, u	ised; test			
	Food properly labeled; original container							strips us Nonfood		surfaces clean			
	Prevention of Food Contamination Insects, rodents, and animals not present				1		Hot and	cold water	Physical Facilities er available; adequate pressu	ro			
	Contamination prevented during food preparation, storage						10			; proper backflow devices	re		
and display Personal cleanliness: clean outer clothing, hair restraint,					V	1	Sewage	and wast	ewater properly disposed				
fingernails and jewelry Wiping cloths: properly used and stored					The same	_				cleaned			
Fruits and vegetables washed before use						Toilet facilities: properly constructed, supplied, cleaned Garbage/refuse properly disposed, facilities maintained Physical facilities installed, maintained, and clean							
Person in Charge /Title:													
Inspector: Telephone No. OLG EPHS No. Follow-up: Yes No.													
MØ 580-1814 (11-14	11/6	oran ora	DISTRIBUTION: WHITE	3-61	63	219		CANARY - FI	F	Follow-up Date: 1	1-19		E6.37
(40)				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				1126					



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ESTABLISHMENT NAME	ADDRESS	CITY		ZIP DOLL	~
FOOD PRODUCT/LOCATION	TEMP.	FOOD PRODUCT/ LOCA	ST Prairie	U 3845	
Ambient Air (AA) milk Covier	32°F			12.00	
Cheken legs, rud wormer	147.1	1			
AA Walk-in Cooler	3200				
THE VOULE IN COURS	571				
Reference Priority items contribute directly to the elim	nination prevention or o	ORITY ITEMS reduction to an acceptable level, hazards associate	ed with foodborne illness	Correct by (date)	Initial
or injury. These Items MUST RECEIVE I	MMEDIATE ACTION W	rithin 72 hours or as stated.	AS 2 1 2 1 54 54 1	J/N=175	
	pray or			10 10	
8-103. 211/10) 11 mpat	are lug	records incomplet	£	10-10	
				74	
Cade	188	DREITEMS		Correct by " I	Initial
Reference Core items relate to general sanitation, op	erational controls, facili	ties or efructures, equipment design, general main corrected by the next regular inspection or as	tenance or senitation stated.	(date)	iniceal .
4-904.11(8) Suga service	c files	not deplayed with	hardle up.	10-10	
4-204.110 Joe build li	o in walk	in freezer	'	11 = 121	
71.65111					7
4.501.11 Fingues o	delacheo	I from Cuoling unit 1	n Walkin tri	781	7
		inc stored above in	ce item.	11-14	- 1
in Wallein 3	outer				
5-501-15/A) TOBER AVILLE	Id bro	uto -		11-121	
4-SMILL DONE AND 3-AL	danse	- Co City I		16 111	
January Del Jan	aamagi	2 in outside Tricz		11-14	
4-501, (B) Durc Sent on	milker	oler Missing and	damaged	11-14	
4-304.100 Milk Pooler	nos wo	it is corpeting in 1	ottom	11-11	
4-501.11 150Hom 01 11	re mile	cooler is rusting		19-125	
Bray is directly plymber	EDUCATION I	PROVIDED OR COMMENTS		77-11-2	77-11-4
may same in premise	S. 13.(13.0	in dure making.			
Person in Charge /Title:	1.		Date: //) - 7	-2019	
Inspector: Many Ma		one No. 29 EPHS No.	Follow-up:	001	No
MØ 580-1814 (11-14)	ISTRIBUTION: WHITE-OWN	1080 1116	Follow-up Date: //	-14-19	E6.37A