

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

TIME IN 25	TIMEOUSO
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WITH ANY TIME LIM	PECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NO SPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE MITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RE	SPECIFIED IN WRITING BY	THE REGULATORY ALITHOPITY. EALLINE TO	COMPLY		
ESTABLISHMENT NAME: OWNER:			PERSON IN CHARGE:			
ADDRESS: 2071 S Main			COUNTY	(10)		
CITY/ZIP:	Ston 63834 PHONES-600	FAX:	FAX: P.H. PRIORITY: DH M L			
BAKERY RESTAURAN	□ C STORE □ CATERER □ DELL	GROCERY STOR	RE INSTITUTION MOBILE VENDORS			
PURPOSE Pre-opening	Routine   Follow-up   Complaint   Oth		☐ IAVERN ☐ MOBILE VENDORS			
FROZEN DESSE ⊠Approved □Disa License No.	SEWAGE DISPOSAL  approved  Not Applicable  PUBLIC  PRIVATE	WATER SUPPLY COMMUNITY				
	RISK FACTORS	AND INTERVENTIONS	THE RESERVE NO. OF LAND			
Risk factors are foo	od preparation practices and employee behaviors most commonly utbreaks. Public health interventions are control measures to pre	reported to the Centers for Dis	sease Control and Prevention as contributing factor	ors in		
Compliance /IN OUT	Demonstration of Knowledge COS	R Compliance	Potentially Hazardous Foods	COS R		
(IN) (OO)	Person in charge present, demonstrates knowledge, and performs duties.	IN OUT N/O N/A	Proper cooking, time and temperature			
IN OUT	Employee Health  Management awareness; policy present	IN OUT N/O N/A IN OUT N/O N/A	Proper reheating procedures for hot holding Proper cooling time and temperatures			
IN OUT	Proper use of reporting, restriction and exclusion  Good Hygienic Practices	IN OUT NO NIA	Proper hot holding temperatures			
IN OUT N/O	Proper eating, tasting, drinking or tobacco use	IN OUT N/O N/A	Proper cold holding temperatures  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)			
NOUT N/O	Preventing Contamination by Hands Hands clean and properly washed	IN OUT N/A	Consumer Advisory Consumer advisory provided for raw or			
IN OUT N/O	No bare hand contact with ready-to-eat foods or		undercooked food Highly Susceptible Populations			
IN OUT	approved alternate method properly followed  Adequate handwashing facilities supplied &	IN OUT N/O N/A	Pasteurized foods used, prohibited foods not			
	accessible Approved Source	OUT NO NA	offered			
IN OUT	Food obtained from approved source	IN OUT N/A	Chemical Food additives: approved and properly used			
IN OUT N/O N/A	Food received at proper temperature	(IN) OUT	Toxic substances properly identified, stored and used			
IN OUT NO NA	Food in good condition, safe and unadulterated  Required records available: shellstock tags, parasite	IN OUT	Conformance with Approved Procedures			
11 001 100 10A	destruction  Protection from Contamination	IN OUT (N/A)	Compliance with approved Specialized Process and HACCP plan			
IN OUT N/A	Food separated and protected	The letter to the left o	f each item indicates that item's status at the time	of the		
IN OUT N/A	Food-contact surfaces cleaned & sanitized	inspection. IN = in compliance				
IN OUT NO	Proper disposition of returned, previously served, reconditioned, and unsafe food	N/A = not applicable COS = Corrected Or	e N/O = not observed			
	the succession of the successi	TAIL PRACTICES				
IN OUT	Good Retail Practices are preventative measures to control the	introduction of pathogens, ch	emicals, and physical objects into foods.			
100,000,000	Safe Food and Water COS steurized eggs used where required	R IN OUT In-use u	Proper Use of Utensits tensils: properly stored	COS R		
Wa	ater and ice from approved source		, equipment and linens: properly stored, dried,			
	Food Temperature Control	Single-u	se/single-service articles: properly stored, used			
App	equate equipment for temperature control proved thawing methods used	Gloves	used properly Utensils, Equipment and Vending			
The	ermometers provided and accurate		d nonfood-contact surfaces cleanable, properly			
	Food Identification	Warewa	d, constructed, and used shing facilities: installed, maintained, used; test			
Foo	od properly labeled; original container	strips us Nonfood	ed -contact surfaces clean			
Ins	Prevention of Food Contamination sects, rodents, and animals not present	Hot and	Physical Facilities cold water available; adequate pressure			
Insects, rodents, and animals not present  Contamination prevented during food preparation, storage and display		Plumbin	g installed; proper backflow devices			
Personal cleanliness: clean outer clothing, hair restraint,		Sewage	and wastewater properly disposed			
fingernails and jewelry Wiping cloths: properly used and stored		Toilet fac	cilities: properly constructed, supplied, cleaned			
Fru	uits and vegetables washed before use	Garbage	/refuse properly disposed; facilities maintained			
Person in Charge /Title:    Physical facilities installed, maintained, and clean						
Inspector: Telephone No. 19 EPHS No. Follow-up: Yes No.						
MO-580-1814 (11-14)	DISTRIBUTION: WHITE - OWNER'S	SCOPY CANARY-FII	Follow-up Date:	E6.37		



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TIMPINOS	TIME OUTS D
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ESTABLISHMENT NAME ADDRESS	1 S. Man El	10010 to ZIP 200	211
FOOD PRODUCT/LOCATION TEMP.	FOOD PRODUCT/ LOCA	TION TEMP.	) /
Ambient Ac/AA) Walk-in Collic 32	of Attrausen stand u		F
AA Salad Cooler 360	All Porecion - aux 34	and up cooler 37°	o fin
Teleriam mx/Teocream 4001.			
Tractives .			
Code Reference Priority items contribute directly to the elimination, prevent	PRIORITY ITEMS	ert with foodborne illnoors (dela)	Initial
Reference Priority items contribute directly to the elimination, prevent or injury. These Items MUST RECEIVE IMMEDIATE ACT	TION within 72 hours or as stated.	ed with foodborne illness (date)	
4-602/ Soda nozzles at	customer self serve	Station 1-24	
are moldy			
Code	CORE ITEMS	Correct by Ir	illial
Reference Care items relate to general senitation, operational control standard operating procedures (SSOPs). These items are	s, facilities or structures, equipment design, general main a to be corrected by the next regular inspection or as	tenance or sanitation (date)	
7-601.11(c) Beverage-air trei	lzer has food de	Long 2-6	
on abor seal			
4-601.11(c) Beverage-air Sta	whip cooler with	UD alass 2-10	
door 1 beverag	causens.	tendup	
tructer has 4	god debris		
3-304.14 WIDIAG CLOTHS 45	sed for Wight Com	nters and 2-6	
equipment not l		21572 C	
2-201 (D/E) To so and			
3-34.12(E) Ice scoop not be	coffee making avec		
		2/	
6-301, 2 No paper towels a	+ hardsinks by grill	and coffeering	
3-501. 12 (A) Trausen stand up	Co. 3 10.1		
12-501.12 (13) Trausen stand up	freezer not maintain	119 9-6	
	TION PROVIDED OR COMMENTS		
Person in Charge /Titley		Date: / ) _ ) / ) / ) / )	
a farting author to	elephone No. 200 EPHS No.	1-01,000	)
MG 580-1814 (11-14) DISTRIBUTION: WHITE	13-600 21911 / 6081	Follow-up Date: Yes D	S S



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ESTABLISHMEN	IT NAME	ADDRESS () 7	5 Maia Ew	ladosta	ZIP/	211
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/ LOCA	TION	TEME	) "J
Code		PRIC	ORITY ITEMS		Correct by	Initial
Reference	or injury. These items MUST RECEIVE I	nination, prevention or r MMEDIATE ACTION w	eduction to an acceptable level, hazards associate within 72 hours or as stated.	ed with foodborne illness	(date)	
Code						
Reference	Core items relate to general sanitation, up standard operating procedures (SSOPs)	arational controls facility	RE ITEMS les or structures, equipment design, general main corrected by the next regular inspection or as	enance or sanitation	Correct by (date)	Initial
// P ~	TI (10)	in the control of the	periocion by the tract regions, inspection of the	Stated.		
4-500	MB) Hobbert	Ax tem	perature on of	acchiete	2-6	
	or within	Intende	of range of u	accurate		
		EDUCATION P	PROVIDED OR COMMENTS			
Dorge In C	avad (Tible: //					
Person in Cha	angeritte: Author	torc/ 751	1022	Date:   - 21 -	2021	
nspector:	ie Mora	Telephor	1065 2191 1081	Follow-up: Date:	Yes	No OC