

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

TIME IN 30	TIME OUT /
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INEX I ROUTINE INSPE	CHON, OR SUCH SHORTER PERIOD	OF TIME AS M	IAY BE	SPEC	IFIED I	IN WRI	TING BY 1	ONS OR FACILITIES WHICH MUST BE CORRECTED BY THE REGULATORY AUTHORITY, FAILURE TO COMPLY	THE			
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESUL ESTABLISHMENT NAME:  OWNER:					PERSON IN CHARGE:							
ADDRESS: 116 5 BOX					COUNTY: KEHN MILEMANY							
GITY/ZIP: 10 PHONE:					TANK THISSISSIPPI							
ESTABLISHMENT TYPE				P.H. PRIORITY:   H   M   L								
BAKERY C. STORE CATERER DELI RESTAURANT SCHOOL SENIOR CENTER TEMP, FOOD				DD	☐ GROCERY STORE ☐ INSTITUTION ☐ TAVERN ☐ MOBILE VENDORS							
PURPOSE												
FROZEN DESSERT  □ Approved □ Disapproved □ Not Applicable  SEWAGE DISPOSAL □ PUBLIC					WATER SUPPLY ON-COMMUNITY PRIVATE							
License No Public PRIVATE				Date Sampled Results								
		RISK FAC							7 3			
foodborne illness outb	reaks. Public health interventions are c	ontrol measure:	nmonly s to pre	reporte	ed to the	ie Cent ne illne	ters for Dis	sease Control and Prevention as contributing factors in				
Compliance IN OUT	Person in charge present, demonstrate	ge	cos		Compliance			Potentially Hazardous Foods COS Proper cooking, time and temperature	R			
/%	and performs duties  Employee Health	9-1						Proper reheating procedures for hot holding				
IN OUT	Management awareness; policy preser Proper use of reporting, restriction and				IN OUT N/O N/A Prope			Proper cooling time and temperatures Proper hot holding temperatures				
IN OUT N/O	Good Hygienic Practices Proper eating, tasting, drinking or toba	3:			JN3	OUT	N/A	Proper cold holding temperatures				
IN OUT N/O	No discharge from eyes, nose and mor				TN	OUT (A	V/Q N/A	Proper date marking and disposition Time as a public health control (procedures /	+			
(2) au = 1110	Preventing Contamination by I	Hands			6			records)  Consumer Advisory				
(IN) OUT N/O Hands clean and properly washed					(IN)	OUT	N/A	Consumer advisory provided for raw or undercooked food				
No bare hand contact with ready-to-eat foods or approved alternate method properly followed						_ [	Highly Susceptible Populations					
Adequate handwashing facilities supplied & accessible						I/O N/A	Pasteurized foods used, prohibited foods not offered					
IN OUT	Approved Source Food obtained from approved source				IN OUT N/A Food		N/A	Chemical Food additives: approved and properly used				
IN OUT N/O N/A Food received at proper temperature				IN OUT TO			Toxic substances properly identified, stored and used					
IN OUT Food in good condition, safe and unadulterated IN OUT N/O N/A Required records available: shellstock tags, parasite				IN	OUT	(N/A)	Conformance with Approved Procedures  Compliance with approved Specialized Process					
	destruction  Protection from Contaminat						رس	and HACCP plan				
IN OUT N/A	Food separated and protected	Servi			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 & sanif				IN = in compliance  N/A = not applicable  OUT = not in compliance  N/O = not observed							
IN OUT N/O	Proper disposition of returned, previous reconditioned, and unsafe food	98			COS = Corrected On Site R = Repeat Item							
	Good Retail Practices are preventative n		ntrol the				ogens, che	nemicals, and physical objects into foods				
IN OUT	Safe Food and Water		cos	R	IN	OUT		Proper Use of Utensils COS	R			
	eurized eggs used where required r and ice from approved source				X			stensils: properly stored stensils: properly stored, dried,				
	Food Temperature Control				X		handled	use/single-service articles; properly stored, used				
Adequate equipment for temperature control				Q			used properly					
Approved thawing methods used Thermometers provided and accurate							Food an	Utensils, Equipment and Vending and nonfood-contact surfaces cleanable, properly				
Food Identification				X			d, constructed, and used ushing facilities: installed, maintained, used; test					
Food properly labeled; original container				$\frac{\wedge}{V}$		strips us Nonfood	sed d-contact surfaces clean					
Prevention of Food Contamination Insects, rodents, and animals not present				V		Hot and	Physical Facilities cold water available; adequate pressure					
Contamination prevented during food preparation, storage and display				$\hat{\chi}$			g installed; proper backflow devices	Ħ				
Personal cleanliness: clean outer clothing, hair restraint, fingernalls and jewelry				X		Sewage	and wastewater properly disposed	-				
Wiping cloths: properly used and stored Fruits and vegetables washed before use					X	- 1		cilities: properly constructed, supplied, cleaned e/refuse properly disposed; facilities maintained				
					facilities installed, maintained, and clean  Date:							
5-11-2021												
Inspector:    Telephone No   Follow-up:   Yes   No												



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ESTABLISHMENT	NAME GULLEN	ADDRESS	Pine	CITY	Praire	ZIP ( DY	45
	DD PRODUCT/LOCATION	TEMP.		PRODUCT/ LOCATIO	N Patrice	TEMF	) / J
Ample	Of AICIAH) Hobert	3806					
AAS	thin cools	36%					
AHSO	turn make-	370-					
	linerouler			2002	company of		
Code Reference	Priority items contribute directly to the elir or injury. These Items MUST RECEIVE I	PRIC nination, prevention or re MMEDIATE ACTION wi	ORITY ITEMS eduction to an acceptable le thin 72 hours or as stated	evel, hazards associated w	ith foodborne illness	Correct by (date)	Initial
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	none de	- this t	IMP				
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				100000			
				8767			
				SPREEL			
				2.5 100			
				凝。			
Code		CO	RE ITEMS				Initial
Reference	Core items relate to general sanitation, op- standard operating procedures (SSOPs).	These items are to be	es or structures, equipment corrected by the next reg	it design, general maintena jular inspection or as sta	ince or sanitation ted.	(date)	183
6.201.1	PHET DICKLIN	midhim	above	Consta	addle	11197	
01770112	an the co	11/16	C OCCOVE	rigers/9	riciana	JVKI	
				H.			
				5			
				4.			
							-
				1			
				Street			
A 1:07		EDUCATION P	PROVIDED OR COMME	ENTS			
ARI = Mext Pout ne inspection. Inspected be advise there							
Person in Cha	arge /Title:	<u>~</u>			ate:	7 - 7	A 2 T
Inspector:	A 1790	Telephor	ne.No FPL	A STATE OF THE PARTY OF THE PAR	ollow-up:	Yes D	No No
MO 580-1814 (11-14)	e Malar	DISTRIBUTION: WHITE-OWNE	V65-219V	RY-FILE COPY	ollow-up Date:	163	E6.37A