

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

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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:				AC.						PERSON IN CHARGE:		
ADDRESS: 00 BLOSIL & PARK				2/	COUNTY))		
CITY/ZIP: 10 Styn (23834 PHONE:				0108		FAX	(ř			P.H. PRIORITY: H	<u>/</u> -	L
ESTABLISHMENT TYPE BAKERY C. STORE CATERER RESTAURANT SCHOOL SENIOR CENTER T					200			ERY STOR		NSTITUTION		
BAKERY C. STORE CATERER DELI GROCERY STORE INSTITUTION ERESTAURANT SCHOOL SENIOR CENTER TEMP. FOOD TAVERN MOBILE VENDORS PURPOSE Pre-opening Routine Follow-up Complaint Other												
FROZEN DESSERT Approved Disapproved Not Applicable License No. SEWAGE DISI PUBLIC PRIVATE								IPPLY UNITY		N-COMMUNITY PRIVA e Sampled Result	T E	
Risk factors ar	re food r	preparation practices and employ	RISK FA						01	ol and Prevention as contributing fact		Day.
foodborne illnes	ss outbr	eaks. Public nearth intervention	s are control measu	res to pi	revent f	oodbo	rne illne	ss or injur	у.			
IN OUT		Person in charge present, demand performs duties		CO	SR		OUT (N/O N/A	Proper cod	Potentially Hazardous Foods oking, time and temperature	COS	SR
INCOUT		Employee He Management awareness; policy						WOKN/A		heating procedures for hot holding		
IN OUT		Proper use of reporting, restrict	on and exclusion			IN	OUT I	N/O N/A	Proper hot	oling time and temperatures tholding temperatures		
IN OUT N/O		Good Hygienic P Proper eating, tasting, drinking					OUT N	N/A N/O N/A		d holding temperatures te marking and disposition		
OUT N/O		No discharge from eyes, nose a				IN	OUT N	V/Q N/A	Time as a	public health control (procedures /		
2		Preventing Contaminat					500		records)	Consumer Advisory		
IN OUT N/O		Hands clean and properly wash							undercook			
		No bare hand contact with read approved alternate method pro	perly followed			1			Н	ighly Susceptible Populations		
JAY OUT		Adequate handwashing facilities accessible				(IN)	OUT N	OUT N/O N/A Pasteurized foods used, prohibited foods not offered				
JN OUT		Approved So Food obtained from approved s	ource			JN	OUT	(N/A)	Food addit	Chemical lives: approved and properly used		
IN OUT N/O N/A Food received at proper temperature						OUT	(3)	Toxic subs	stances properly identified, stored and			
IN OUT N/O N/A Required records available: shellstock tags, parasite					IN	OUT	(N/A)	Confor	mance with Approved Procedures e with approved Specialized Process			
destruction								and HACC	P plan			
IN OUT	Protection from Contamination N/A Food separated and protected					The	letter to	the left o	f each item ir	ndicates that item's status at the time	of 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 COS = Corrected On Site N/O = not observed R = Repeat Item							
		015.1.15		OODR	ETAIL	PRACT	TICES					
IN OUT		Good Retail Practices are preven Safe Food and Wate	tative measures to o	control th	e introd	duction	of path	ogens, ch		physical objects into foods.	cos	R
X		urized eggs used where required		000	ı `		X	In-use u	tensils: prop		003	.13
\times	Water	and ice from approved source					X	Utensils handled		and linens: properly stored, dried,		
	Adagu	Food Temperature Con	rol			文		Single-u	se/single-ser	rvice articles: properly stored, used		
1	Approv	ate equipment for temperature coved thawing methods used	ntrol			1		Gloves	used properly	Equipment and Vending		
		ometers provided and accurate					V	Food an	d nonfood-co	ontact surfaces cleanable, properly		
		Food Identification	1000					designe Warewa	d, constructe shing facilitie	d, and used es: installed, maintained, used; test		
X	Food properly labeled; original container						strips us					
	Prevention of Food Contamination							P	hysical Facilities			
	Contamination prevented during food preparation, storage				X	-	Hot and	cold water a	vailable; adequate pressure roper backflow devices			
and display						X						
Personal cleanliness: clean outer clothing, hair restraint, fingernalls and jewelry					X				ater properly disposed			
Wiping cloths: properly used and stored Fruits and vegetables washed before use					X	X	Toilet fac	refuse prope	rly constructed, supplied, cleaned erly disposed; facilities maintained			
					X				alled, maintained, and clean			
Person in Charge /Title: The Cerestre General Manager Date: /2-					12 25 00	19						
Inspector: Telephone No. 3 29 EPHS No. Follow-up: Follow-up Date: No. Follow-up Date:						0						
MO 580-1814 (11-14)			DISTRIBUTION: WHITE	OWNER	S COPY			CANARY - FIL	E COPY	1-9-20	20	E6:37



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FOOD PRODUCT/LOCATION	ADDRESS BO	OSIQUE PARKED CITY FOOD PRODUCT/ LOCA	Laleston	ZIP (3832) TEMP.
Code Reference Priority items contribute directly to the elim or injury. These items MUST RECEIVE I	PRIO mation, prevention or r MMEDIATE ACTION W	ORITY ITEMS reduction to an acceptable level, hazards associate rithin 72 hours or as stated.	ed with foodborne illness	Correct by Initial (date)
11 21 - (1) (2)	intainers	Cracked +dam	aged	12-26
2-103.11 (M) Employe		y for illness not	in water	912-210
5-603,11(c) Mocensur	ner adv	sur providedto	r raw	12-210
				E 51
Code Reference Core itams relate to general sanilation, op-	cc erational controls, facili	ORE ITEMS ties or structures, equipment design, general main a corrected by the next regular inspection or as	tenance or sanitation	Correct by Initial (date)
4-004.720 Ice build-1	p in ma	Ster but there	Stated.	1-9
4-204.112 Check there	monuter an ada	ditional one ASC	Lement	1-9
5-205,15(B) Faucett	leaking	on nuat sink		1-9
4-601.11(c) Grease	hear o	dishes up on 1	racks	1-9
4901.11(A) Cleandis	sues no	landred bet	ere stack	ng 1-9
3-304.19 W.ping 10	tus not	being Stored in 5	sanitize	71-9
1-601,//(C) Pust an	TWI IN	Ritchen area	> -)-9
	EDUCATION F	PROVIDED OR COMMENTS	_ /- v	
Person in Charge /Title:	Vens		Date: / 2 - 2	3-19
Inspector Matter Mosses (1997)	Telepho	1085 2811 / 1081	Follow-up: Date:	Yes No No E6.37A



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ESTABLISHMENT NAME SNACLE BOX	- ADDRESS Beas	JON Pa	de Rd Elly	orlestan	ZIP 2822	1
FOOD PRODUCT/LOCATION	TEMP.	FOO	DD PRODUCT/ LOCAT	TION	TEMP.	
				Ę		
Andr. I						
Code Reference Priority items contribute directly to the or injury. These Items MUST RECEN	PRIOR elimination, prevention or red /E IMMEDIATE ACTION with	RITY ITEMS luction to an acceptable in 72 hours or as sta	e level, hazards associate	d with foodborne illness	Gorrect by Initi (date)	tial)
	· · · · · · · · ·	8.	43010			
Code	COR	EITEMS		J/F 20 C FF 10 C	Correct by Initial	,
Reference Core items relate to general senitation standard operating precedures (SSOF	operational controls, facilities s). These items are to be co	s of structures, equipm prrected by the next	tent design, general mein regular inspection or as	enence or sanitation stated.	(date)	-8
10-301.14 Bathrooms a	Staff to w	ash har	acle sgn	2,	1-9	
4-903 /1(B) Plates 0	n the serv	aceline	arelx	posed to	1-9	
Plates or	e not Jiny	ested	5 walking	ng by,		
4-101,19 Cleand	utensils de	arestu	ed in con	dboard	1-9	
620214 Batwoon	hex to	thelau	indry 100	m doesnit	- 1-9	
3-302,11(A)(3) The f	Iter tog-	the 180	e mach	nehors	1-9	
a Stickers	tating h	ther wo	as last	Chergia		
	EDUCATION PR	OVIDED OR COM	MENTS			(2)(D)()
A	LUGONION FR	OVIDED ON GOIM	WILLIAM STATE OF THE STATE OF T			
Person in Charge /Title:	Unver			Date: /	3-19	\exists
Inspector: Marcus	Telephone	No3.2191 E	PHS No.	Follow-up: Follow-up Date:	9-2020	0
MQ/580-1814 (11-14)	DISTRIBUTION: WHITE - OWNER'S	S COPY CA	NARY - FILE COPY	Tollow-up Date. 1	E6.3	